State of New Mexico
Energ, 'inerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	
	30-025-24281

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.
B-2956, B-1518, K-5926

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

New Mexico "NN" State Com

1. Type of Well:
OIL WELL [ ]   GAS WELL [X]   OTHER

2. Name of Operator
Redstone Oil & Gas Company

3. Address of Operator
8235 Douglas Avenue, Suite 1050 Dallas, TX 75225

8. Well No.
1

9. Pool name or Wildcat
Vacuum, N. (Atoka Morrow)

4. Well Location

Unit Letter __L__ : __1980__ Feet From The __South__ Line and __660__ Feet From The __West__ Line

Section __8__   Township __17S__   Range __35E__   NMPM   __Lea__   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3984' (GR)

11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [X]   PLUG AND ABANDON [ ]

TEMPORARILY ABANDON [ ]   CHANGE PLANS [ ]

PULL OR ALTER CASING [ ]

OTHER:_____ [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]   ALTERING CASING [ ]

COMMENCE DRILLING OPNS. [ ]   PLUG AND ABANDONMENT [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER:_____ [ ]

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1) Pull tubing and clean out hole.

2) Replace tubing string.

3) Swab, flow test, and return to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____   TITLE __Engineer__   DATE __8/21/96__

TYPE OR PRINT NAME   C. Scott Royal

TELEPHONE NO. (214) 368-0202

(This space for State Use)

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: