Submit 3 Copies to Appropriate District Office

CONDITIONS OF AFTROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	chargy, Minerals and Natural Resources Department		•	Revised 1-1-29
DISTRICT I P.O. Box 1980, Hobbs, NIM, 88240	D. Box 1980, Hobbit, NM 88240 P.O. Box 2088 STRICT II South Fe. New Merrice, 97504 2088		WELL API NO.	
DISTRICT II			30-003-20	018
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of L	esse
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Le	STATE E FEE
			LH-305	
( DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM (	FICES AND REPORTS ON HOPOSALS TO DRILL OR TO DE PROPERTION FOR SUCH PROPOSALS	EPEN OR PLUG BACK TO A DR PERMIT	7. Lease Name or Uni	
1. Type of Well: OR GAS WELL X WELL	·		7	• •
WELL X WELL  2. Name of Operator	OTHER		STATE	
HUNT OIL COMPANY		· ·	8. Well No.	
3. Address of Operator			9. Pool name or Wildo	rat
P.O. Box 720420, N.	orman, Oklahoma 730	70-4307	Wildcar	
	00			<u> </u>
Unit Letter :10	90 Feet From The South	1 Line and 660	Foot From The	East Lin
Section 16	Township 3S	Range 13W	NMPM	
		heiher DF, RKB, RT, GR, etc.)	NMPM //	Catron County
		73' GR		
Check	Appropriate Box to Indic	eate Nature of Notice, R	eport, or Other Da	ata
NOTICE OF INT	TENTION TO:	SUB	SEQUENT REP	ORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	<u> </u>	_
TEMPORARILY ABANDON	CHANGE PLANS			TERING CASING
	CHANGE PLANS	COMMENCE DRILLING	OPNS. X PLU	IG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB	
OTHER:		OTHER:		
12. Describe Proposed or Completed Operat	ions (Clearly state all pertinent deta	uils, and sive partinent dates inclus	line estimated data of ver-	
work) SEE RULE 1103.	, , , , , , , , , , , , , , , , , , , ,		Construct date of Start	ing any proposea
20" conductor set MI & RU Norton Dr:	at 40' with dry hol illing Co. Rig #13.	e digger. Cement w Spud 4:00 p.m. 10/6	ith Redimix. 5/89.	
SIGNATURE C.D. Will	and complete to the first of my incovinde	District Supe	.07 5000	DATE 1019189 ELEPHONE NO.
(This space for State Use)	en-	DISTRICT SU	PERVISOR	10-14-89