Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015=02308
District III - (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Sultu 1 0, 1411 07000	0
87505		13-10716
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	0.1.
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		CALOLINE
1. Type of Well: Oil Well Gas Well Other		8. Well Number
2. Name of Operator		9. OGRID Number
David G. Hammond		156206
3. Address of Operator		10. Pool name or Wildcat
PO Box 1538 Artesia NM 88211		Millman TR EAST
4. Well Location		
Unit Letter D' : 990 feet from the N line and 990 feet from the N line		
Section 29 Township 195 Range 28 E NMPM County Edit		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	11. Dievation (bnow whether DR, IAID, RT, GR, etc.	
<u> </u>		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		
OTHER:	OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion. Reflicked Made and the first transfer of the first		
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. REFLIE BISHED MOFOR SET, NEW Plow IIWE AROM PUMPING FEE, BACKSIDE OPEN, NO LIWE WILL BE ATTACHED PRODUCTION REPORTS UP to date. WELL RETURNED TO BENIFICAL USE. NEW WELL SIGN ON ORDER.		
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UP to date. WELL RETURNED to BENIFICAL USE. NEW WELL		
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<u>,</u>		III OLIVED
Sand Data	n' n l n l	SEP 08 2011
Spud Date:	Rig Release Date:	7.
		NMOCD ARTESIA
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE Owner/Operator DATE 9/6/20//		
Type or print name David G. Hammond E. mail address: actathor 2002 (Nucheau com. DUONE: 575-200-7662)		
Type or print name <u>David G. Hammond</u> E-mail address: <u>estefban2002@yahoo.com</u> PHONE: <u>575-308-7662</u> For State Use Only		
APPROVED BY: Date 9-15-11		
Conditions of Approval (if any):		
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