Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO. 30-015-28054

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

6. State Oil & Gas Lease No. L1648

RECEIVED AUG 2003 OCD - ARTESIA

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: Myrtle Myra

1. Type of Well: Oil Well [X] Gas Well [ ] Other

2. Name of Operator: RAY Westall

8. Well No. 10

3. Address of Operator: P.O. Box 4 - Loco Hills, NM 88255

9. Pool name or Wildcat: Wildcat

4. Well Location

Unit Letter P : 760 feet from the South line and 660 feet from the East line

Section 9 Township 21S Range 29E NMPM County Eddy

10. Elevation *(Show whether DR, RKB, RT, GR, etc.)*

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	Start PLUG AND ABANDONMENT [X]
PULL OR ALTER CASING [ ]	MULTIPLE COMPLETION [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

7/31/03:

Set CIBP @ 640'. Shot 4 squeeze holes @ 60'.

Accepted for record - NMOCD

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

SIGNATURE Ruben Mathews TITLE Production DATE 8/5/03

Type or print name Telephone No.

(This space for State use)

APPPROVED BY TITLE DATE

Conditions of approval, if any: