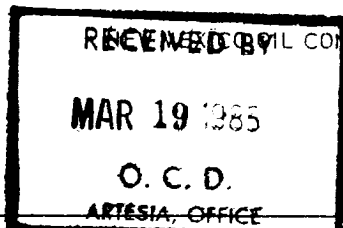


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SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
OPERATOR	✓



Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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.)

6. CIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
1. Name of Operator Jack Plemons ✓	8. Form or Lease Name Continental "27" ✓
2. Address of Operator P.O. Box 385, Artesia, New Mexico 88210	9. Well No. 6
4. Location of Well UNIT LETTER <u>D</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>27</u> TOWN <u>17S</u> RANGE <u>29E</u> NMPM.	10. Field and Pool, or Wildcat SR-Q-G-SA
15. Elevation (Show whether FF, RT, CR, etc.) 3542-5	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

On March 4, 1985, we ran 3318' of 15½ lb. 5 1/2" casing. Cemented with 1000 sacks.
WOC 24 hours. Had flow. Cemented with 250 sacks at top. WOC 18 hrs.
Pressure tested 600 lbs. for 30 minutes. Water shut off.

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

SIGNED [Signature] TITLE Agent DATE March 19, 1985

APPROVED BY _____ TITLE ORIGINAL SIGNED BY LARRY BROOKS DATE MAR 22 1985
CONDITIONS OF APPROVAL, IF ANY: GEOLOGIST - NMOCD



100-1-100000
100-1-100000
100-1-100000