State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-103
Revised 1-1-89

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District Office		VI
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVA		WELL API NO.
P.O. Bo		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Me	xico 87504-2088	30-015-28382 5 Indicate Type of Lease
		5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON	WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DE	EPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FO	OR PERMIT	
(FORM C-101) FOR SUCH PROPOSALS	.)	Fairchild 13
1. Type of Well: OIL GAS WELL X WELL OTHER		
2. Name of Operator		8. Well No.
Nearburg Producing Company		#4
3. Address of Operator		9. Pool name or Wildcat
P. O. Box 823085, Dalas, TX 75382-3085		Dagger Draw; Upper Penn, North
4. Well Location		
Unit Letter G: 1,980 Feet From The North	Line and $1,98$	O Feet From The East Line
Section 13 Township 19S	Range 25E hether DF, RKB, RT, GR, etc.)	NMPM EddyCounty
10. Elevation (Show w)	neiner Dr., KAB, KI, GK, elc.)	<i>\$111111111111111111111111111111111111</i>
1. Check Appropriate Box to Indic		-
NOTICE OF INTENTION TO:	SUB	SEQUENT REPORT OF:
ERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
FEOG AND ABANDON	NEMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CE	MENT JOB
OTHER: Extension Request	K OTHER:	
12 Describe Proposed or Completed Operations (Clearly state all pertinent detawork) SEE RULE 1103. Request an extension of original applicat		
nequest an excension of original applicat	Ton approved on 03/	
		RECEIVED
	DAYS	
APPROVAL VALID F PERMIT EXPIRES UNLEUS LRILLING	2/10/96	SEP 07 1995
APPROVED	245 TOWAY	
PERMILLERAL	All Days	
UNLEGS		OIL CON. DIV.
		DIST. 2
		Pasted FD-1
Dogling Line French	410	•
HPPlicAtION EXPI	•	9-37-96
I hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.	
SIGNATURE Taulitte Scriston	THE Admin. Assn	t. DATE 09/05/95
TYPEOR PRINT NAME Paulette Houston		TELEPHONE NO. 505/397-41
(This space for State Use)		
Ometasl mendo by the wards District is supervisor		SEP 1 1 100F
APPROVED BY	- TMLE	DATE 568 1 1 1995

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