Submit 3 Copies to Appropriate District Office		-	tate of New M and Natural R	exico esources Department		Form C-103 Revised 1-1-89	
DISTRICT 1 P.O. Box 1980, Hobbs,	NM 88240	OIL CONS	ERVATION P.O. A.	MOINION	WELL API NO.		
DISTRICT II P.O. Drawer DD, Artes	ia, NM 88210	Santa Fe,	New Mexico	87504-2088-2	5. Indicate Type of	Lesse STATE FEEXX	
DISTRICT III 1000 Rio Brazos Rd., A	Azzec, NM 87410		, <b>G</b>	LCON DIA	6. State Oil & Gas		
	SUNDRY NOT	CES AND REPO	DETS ON WE	1000	1//////////////////////////////////////		
( DO NOT USE THIS	S FORM FOR PRO IFFERENT RESEF	DPOSALS TO DRILL IVOIR. USE "APPU 101) FOR SUCH PE	OR TO DEEPEN CATION FOR PE	OR PLUG BACK TO A	7. Lease Name or U	Juit Agreement Name	
i. Type of Well: off	WELL XX		отнеж		Koon		
2. Name of Operator					8. Weil No.	İ	
	rating Co	mpany			#1 9. Pool name or Wi	Ideas	
3. Address of Operato			m. 1	74100		į	
4. Well Location	rourtn, S	<u>uite 900;</u>	Tulsa, (	OK 74103	<u> Rasın Fr</u>	witland Coal	
		Feet From The			Feet From		
Section.	14 ////////////////////////////////////	//////	uoa (Show whether	ange 2W DF, RKB, RT, GR, ac.)	NMPM Rio Ar	riba County	
		////// 7:33		27	0.1		
11.		• • •	x to Indicate	Nature of Notice, R			
NO.	TICE OF INT	ENTION TO:		SUE	SEQUENT RI	EPORT OF:	
PERFORM REMEDIAL	L WORK	PLUG AND A	BANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT							
PULL OR ALTER CASING CASING TEST AND C							
OTHER:				OTHER: Plug B	ack & Reco	mpletion XX	
work) SEE RULE	1103.			and give pertinent dates, incli			
1-25-92	POH with 1" tubing lay down. Circulate hole & set 7" Elite CIBP @ 3,410' (PBTD) Spotted 18' Cal-Seal Cement on top of plug. Ran ACBL (Found toc @ 2,690'). Tested plug & csg to 1,000# for % hour.						
	1-26-92 Perforated Fruitland Coals 3,322-24'; 3,328-31', 3,349-59', 3,373-79', 3,385-90' (9 Coals) 2JSPf w/.46" holes. Perform water breakdown w/500 gals. \$\frac{1}{2}\frac{1}{						
		Swab & clean up well - shut-in.					
4-18-92	MIR Pumping unit, Compressor and related equipment prepare to test.						
4-20-92 Began test - See Completion Report.							
I hereby certify that the is	elematica desas is m	e and complete to the her	of my imprinted at	nd batisf.			
i newy cemy the term	MA C	0/100			dent	DATE 4-20-92	
SIGNATURE	Min I	MYSSA	1	ws <u>Vice-Presi</u>	dent	(918)584-3802	
TYPE OR FRONT NAME	Chris Ph	illips				TELEPHONE NO.	

APR 2 2 1992

DECETTY OIL & GAS INSPECTOR, DIST. #3

TYPE CRIPROTI NAME Chris Phillips

Original Signed by CHARLES GHOLSON