Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88:	₂₄₀ O	IT CONSEK			N WELL	L API NO.			
P.O. Box 2088 DISTRICT II Santa Fo. Now Marries 87504 2088					30-045-27640				
P.O. Drawer DD, Artesia, NM : DISTRICT III		Sama 1 e, New	Mexico	0 87304-2088	5. In	dicate Type	of Lease STATE X	FEE [
1000 Rio Brazos Rd., Aztec, NN	1 87410					ale Oil & 0 G = 1 0 3	Sas Lease No.		
SUNDF	Y NOTICES	AND REPORTS	ON WE	IIS	////	//////		77777777	
(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			
1. Type of Well:		. 6.7 666777 7167 653	ALG.)		St.	ate 3	6		
METT V	VELL [OTHER	•		ļ				
2 Name of Operator Bannon Energy Incorporated						8. Well No.			
3. Address of Operator	Incorpo	Lateu				7			
3934 F.M. 1960	West,	Suite 240,	Houst	on, TX 770	9. Po	ol name or	-	_	
4. Well Location						гур	rook Gallu	<u>p</u>	
Unit Letter O			th	Line and	914	_ Feet Fro	m TheEast	Line	
Section 36	T	ownship 24N	R	inge 8W	NMPM	San	Juan	County	
		10. Elevation (Sho 6916' GR	w whether	DF, RKB, RT, GR, etc.,)				
11.	heck Appro	opriate Box to In	dicate 1	Vature of Notice	Report	or Othe	- Dota		
NOTICE C	OF INTENT	TON TO:					REPORT OF:		
PERFORM REMEDIAL WORK		PLUG AND ABANDON	ı 🗆	REMEDIAL WORK			ALTERING CASING	•	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILL					
PULL OR ALTER CASING				CASING TEST AND			PLUG AND ABAND	ONMENT []	
OTHER:							n casing	x	
12. Describe Proposed or Complete work) SEE RULE 1103.	ed Operations (C.	learly state all pertinent	desails, an						
								I	
Drilled 7 7/8" set at 5660'. gilsonite foll down at 9:30 p Tested casing	owed by .m. 11/3	with 550 s 250 sks. 50 3/90. Circ	ks. 6 0/50	5/35 poz w	/12% ge	21 x	ó# per saci	k	
						JV 09			
					Ÿ	OIL CON, DIV. \ pist. 3			
I hereby certify that the information abo	ve is true and comp	siete to the best of my know	ledge and be	dief.J.M. Harı	rison				
SIGNATURE	Dan	m	mu	Operation	ns Mana	ger	DATE 11/5/9	90	
TYPE OR PRINT NAME							TELEPTIONE NO.		
(This space for State Use)									
ATTROVED BY Original Signed	by FRANK T.	CHAVEZ	— π ι νε	SUPERVISOR DI	ISTRICT#	3	PATE OF C	9 1990	