Submit 3 Copies to Appropriate District Office

## State of New Mexico En., Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT | P.O. Box 1980, Hobbs, NM 88240

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION
P.O. Box 2088

WELL API NO.

1.0. box 1700, 11000,	P.O. Box 200		30-025-07115	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210  DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			5. Indicate Type of Lease STATE FEE X  6. State Oil & Gas Lease No.	
1. Type of Well: Off. GAS		_	Wallage	
WELL WELL WELL  2. Name of Operator	OTHER Dry Hole		Wallace  8. Well No.	
C. W. Trainer			1	
3. Address of Operator			9. Pool name or Wildcat	
c/o Oil Reports & Gas 4. Well Location	Services, P. O. Box 75	5. Hobbs. NM 88	241 Gladiola Devonian	
	50 Feet From The South	Line and16	50 Feet From The East Line	
	7	inge 38E	NMPM Lea County	
Section 31	Township 11S Ra		MNIFM SCHOOL STATE OF SCHOOL SCHOOL SCHOOL STATE OF SCHOOL	
	////// 3885 G			
	Appropriate Box to Indicate 1			
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GIOPNS. PLUGIAND ABANDONMENT XX	
PULL OR ALTER CASING		CASING TEST AND CE	EMENT JOB	
OTHER:		OTHER:		
12. Describe Proposed or Completed Oper	ations (Clearly state all pertinent details, a	nd give pertinent dates, inclu	ding estimated date of starting any proposed	
work) SEE RULE 1103.				
		fallova		
	Well plugged 7/25/90 as	TOTIOWS:		
	25 sacks class C cement			
	25 sacks class C cement			
	35 sacks class C cement 35 sacks class C cement			
	15 sacks class C cement			
	Cut off well head, inst		n marker	
	Location to be cleaned	and levelled an	d made ready	
	for inspection.		•	
	and the last of market and an and	I halief		
	ue and complete to the best of my knowledge and		DATE 8/1/90	
SIGNATURE Marina	TIII TIII	Agent		
TYPE OR FRINT NAME			TELEPHONE NO.	
(This space for State Use)				
Oans G	11	OIL (E. C.	and the second s	