

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-20739
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-6469
7. Lease Name or Unit Agreement Name T.P. "A" State Unit
8. Well No. #1-H
9. Pool name or Wildcat South Crossroads Devonian

**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.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Petroleum Development Corporation
3. Address of Operator 9720-B Candelaria NE, Albuquerque, NM 87112	4. Well Location Unit Letter M : 810 Feet From The FSL Line and 660' Feet From The FWL Line Section 15 Township 10 S Range 36 E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4020'	

11. 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"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: operator completed set tbg. <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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.

Drill float collar & shoe, drill from 12313'-12329', 10' pay 20'  
Run 385 Tts 2 7/8 6.5# N-80 Tbg, set Packer @ 12249"  
Tested backside 500psi. Nipple up well head. "4 5/8 Hole"  
Well flowing 1-9-99

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

SIGNATURE Jim C. Johnson TITLE Operator DATE 4/21/99  
TYPE OR PRINT NAME Jim C. Johnson TELEPHONE NO. 505-293-404

(This space for State Use)

ORIGINAL SIGNED BY  
[Signature]

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: