

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVIS. N
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

30-025-21783

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator Tipperary Oil & Gas Corporation		8. Farm or Lease Name Bell "A"
3. Address of Operator P. O. Box 3179, Midland, TX 79701		9. Well No. 1
4. Location of Well UNIT LETTER <u>C</u> <u>720</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>11S</u> RANGE <u>33E</u> N.M.P.M.		10. Field and Pool, or Wildcat North Bagley, Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4292 KB		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. 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.

Perforated Strawn 10482-10475' - 11 JSPF
RU & acidized w/ 2000 gals of 15% NE acid. Work was done September 20, 1983

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

SIGNED J. K. Gleason TITLE Operations Mgr. DATE 10-6-83

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: