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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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. OIL WELL GAS WELL OTHER-
7. Unit Agreement Name

2. Name of Operator
Eunice Monument South Un

3. Address of Operator
8. Farm or Lease Name

9. Well No.
P.O. Box 670, Hobbs, NM 88204
455

4. Location of Well
10. Field and Pool, or Wildcat
UNIT LETTER K, 1980 FEET FROM THE South LINE AND 1980 FEET FROM
Eunice Monument G/SA

THE West LINE, SECTION 21 TOWNSHIP 21S RANGE 36E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3597
12. County
Lea

16. 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>co/dpn</u> <input checked="" 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.

Cleaned out to 3890'. Drilled to new TD of 4102'. Log w/CDL,CNL,CCL. Return in hole w/production equipment. Turn over to production. Work performed 7/12/87 through 7/14/87.

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

SIGNED M. E. Abnis TITLE Staff Drilling Engineer DATE September 8, 1987

APPROVED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE SEP 10 1987

CONDITIONS OF APPROVAL, IF ANY: