Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals And Natural Resources Department

Form C-103 Revised 1-1-89

## **OIL CONSERVATION DIVISION**

DISTRICT I		26	040 Pacheco	St.				
P.O. Box 1980, Hobbs, NM 88240		Sant	a Fe, NM	87505				
DISTRICT II					WELL API NO.	•		
P.O. Drawer DD, Artesia, NM 882	10					30-003-20	0026	
DISTRICT III					5. Indicate Type			
1000 Rio Brazos Rd., Aztec, NM 8	7410					State	X Fee	
- CINDDV	NOTICES	AND DEDODTS	ONWELLS	<del></del>	6. State Oil & Ga		_	
SUNDRY NOTICES AND REPORTS ON WELLS  DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO						16455	7 ////////////////////////////////////	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"						7. Lease Name or Unit Agrement Name		
(FORM C-101) FOR SUCH PROPOSALS.)								
1. Type of Well					1			
Oil	Gas							
Well	Well x		Other	Co2	Cot	ton Wood Ca	anyon unit	
2. Name of Operator					8. Well No.			
		3						
3. Address of Operator		9. Pool Name or Wildcat						
4. Well Location								
Unit Letter f	660	Feet From The	South	Line and	660	Feet From	The east	
				<del>_</del>		_		-
Section	Township		Range		NMPM	( 		County
		10. Elevation (Sha		•				
		<i>       </i>		7 MSL	-			
		riate Box to Indi	cate Nature	1	-			
NOTICE OF IN				SU	BSEQUEN	T REPO	RT OF:	
PERFORM REMEDIAL WORK	P	LUG AND ABANDON	· 🔲	REMEDIAL WO	ORK	ALTE	ERING CASI	NG 🗌
EMPORARILY ABANDON CHANGE PLANS COMMENCE D					RILLING OPNS.			
_					AND CEMENT J			
OTHER: Well Nam	ne Change			OTHER:				
12. Describe Proposed or Complete	d Operations	(Clearly state all pertinent d	letails, and give perti	net dates, including est	imated date of starting	any proposed		<del></del>
work) SEE RULE 1103	•		•		Ů O	, ,		
Change Well name from North S	tate 36-2 to	Cotton Wood Canyon	#3					
Change Well hame Iron North 5	tate 50-2 to	Cotton Wood Carlyon	# 3					
		· · · · · · · · · · · · · · · · · · ·					·	
I hereby certify that the informati	ion aboye is p	rse and complete to the	best of my know	ledge and belief.				
SIGNATURE	1, 11		TITLE	D		DATE		2/7/00
SIGNATURE / / Comucs	(C)		-	Productio	n Manager	- DATE	<del></del>	2///00
TYPE OR PRINT NAME	Ti	nomas White			TELEDI	ONE NO.	520-33	7-3230
		Onias Wille			IELEPH	ONE IVO.		. 0200
(This space for state use)	20 N	//	_		Ch () B pp		,	1
APPROVED BY	2 1/9H	Tun	$\mathbf{D}_{\pi_1 \tau_1 \tau}$	ISTRICT :	SUPERVI:	SOP <sub>DATE</sub>	2/1	1/00
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