Submit 3 Copies To Appropriate District Office District 1 1625 N. French Dr., Hobbs, NM 88240 District III 1000 Rio Brazos Rd., Aztec, NM 87210 District IV 1220 South St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator Herman V. Wallis 3. Address of Operator Post Office Box 291858, Kerrville, Texas 780 4. Well Location	TAI Resources DIVISION Incis Dr. 17505 UG BACK TO A DR SUCH	WELL API NO. 30-005-6025 5. Indicate Type of STATE Control 6. State Oil & Gon N/ 7. Lease Name or FEDERAL LEASE Federal 8. Well No. 9. Pool name or Well Sams Ranch	f Lease N/AFEE N/A as Lease No. A Unit Agreement Name: #NMNM16099 1 "14" 2 Vildcat
Unit Letter D : 660 feet from the North line and 660 feet from the West line			
Section 14 Township 14S · Range 28E N 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3600 RKB			County Chaves
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING ALTERING CASING			
TEMPORARILY ABANDON XX CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB		
OTHER:	OTHER:		
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. All remedial work to be accomplished at a later date.			
Shut-in as low volume, high pressure producer. Will plug back to below surface pipe.			
Will directional drill for completion in NENW Section 14 -T14S -R28E. Will			
Horizontal complete in Sams Ranch Grayburg Gas.			
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reder we		RECEIVED OCO LANCES	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE FEMILIN V. Wallis TITLE	Operator		_DATE_10/01/01
Type or print name Herman V. Wallis		Telep	hone No.830 257-7532
(This space for State use)		-	
APPPROVED BYTITLE_ Conditions of approval, if any:			_DATE