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Cubinis 2 Coming To Americanius Primitis	State of New Men	-or WED	213	Form C-103
Submit 3 Copies To Appropriate District Office	State of New Mex	ARTESIA	314	Revised March 25, 1999
District I	State of New Mer Energy, Minerals and Natur	al Resources	WELL API NO.	REVISES IVALUE 25, 1999
1625 N. French Dr., Hobbs, NM 88240			30-005-6028	9
District II	OIL CONSERVATION	DIVISION	5. Indicate Type of	
811 South First, Artesia, NM 87210	1220 South St. Fran	Cls Drozs Drozs	STATE 🖾	FEE 🗆
District II  811 South First, Artesia, NM 87210  District III  1000 Rio Brazos Rd., Azzec, NM 87410  OIL CONSERVATION DIVISION  1220 South St. Francis Division  Santa Fe, NM 87505			6. State Oil & Gas	
Triangles YV	Sulfat v 0, 1 1212 0 11	1	SW-903	
1220 S. St. Francis Dr., Santa Fe, NM 87505	AVINCIIA		7 Lease Name of L	Init Agreement Name:
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSALS.) 1. Type of Well:	TES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLU ATION FOR PERMIT" (FORM C-101) FO	G BACK TO A R SUCH	State-Com	
Oil Well Gas Well	Other		8. Well No.	
2. Name of Operator	PHONE #830 257-75	32	B. Well 140.	1
HERMAN V. WALLIS	FAX #830 895-17	19	9. Pool name or W	ildeat
3. Address of Operator	79	029-1858	Sams Ranch	Grayburg
Post Office Box 2918	58, Kerrville, Texas 78	1029-1030		
4. Well Location				Sauch II
4. Well Localisa	LAGO C. C. LAG. East	line and	660feet from	the South line
Unit Letter 0	1980 feet from theEast			Į.
Omi Domi	Township 14S R	ange 28E	NMPM Chaves	County
Section 11	Township 14S R. 10. Elevation (Show whether D	D PKR RT GR. e	(c.)	
Double -	10. Elevation (Show whether D	20, 10-20, 2021		
	3601 GR Appropriate Box to Indicate N	lange of Notice.	Report or Other I	Data
11. Check A	appropriate Box to indicate in	SU	SEQUENT REI	PORT OF:
	ETEKIIK INLILI.	REMEDIAL WO	RK 🗆	ALTERING CASING
NOTICE OF IN PERFORM REMEDIAL WORK	PLUG AND ABANDON	<b>\</b>		
PERFORM REMEDUL WORTH	S OUNCE DIANS	COMMENCE D	RILLING OPNS. 🗌	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLANS	l .	_	ABANDONNELL
	A AUNTIDIE	CASING TEST	AND L	
PULL OR ALTER CASING	MULTIPLE LJ COMPLETION	CEMENT JOB		<b>「</b>
				<u> </u>
		OTHER:	i -i entirent dates	including estimated date
OTHER:	eted operations. (Clearly state all r k). SEE RULE 1103. For Multiple	pertinent details, an	a give perment diagram	of proposed completion
12. Describe proposed or compl	SEE RITLE 1103. For Multiple	e Completions: At	IZCII WOILOOZO GIAB	_/
Ut starting any highway				5678/970
or recompilation.	BOP _ RIH WITH WORKSTR	Ing		234567897077
1. MIRU - INSTALL	HOT			
🛦	TAC			
2. SPOT 20 SXS @ 1	1831 - 1/2 =		rior to any work done	100 CM
45	Not	ify OCD 24 hrs. pi	Mor co am	RECEIVED SIA
3. CIR. 9.5# MUD	1404	·•		VECK BLES
	. •			RECEIVED SIM
4. PERFORATE @ 45	50'			\ Opi
				/- at
SOUREZE 35 SX	s @ 450' - 350' d cnt. inside (59 350'- 60' to surface	450' - 749		(5-4525610)
5. SQUEEZE 35 CL	of Cont. inside con 330	<del></del> -		200000
EPOT 10 SXS @	60' TO SURFACE			AND DETIIN
		FILHEAD & ANG	CHORS COVER PIT	L WIN WRIGHT
- THOMATT DRY	OLE MARKER - CUT OFF WOODDITION AS SPECIFIDE	PRE-DRILL CON	DITIONS.	
/ LNSIALL DATE TO C	ONDITION AS SPECIFIDE	the heet of my kno	wledge and belief.	
LOCAL SOL INFORM	ALENI ALLIVE IS THE		-	DATE 013102
I hereby certify that	nn V. Mallie TIT	OPERAT	OR	<del></del>
بدد کارسوسیات	MN Y. I WILLE	<u> </u>	_	elephone No. 830 257-7532
SIGNATURE / Y			a a _ A T	FAX 830 895-1718
HER	MAN V WALLIS	4 -/		PAX 830 895-1718 FFB 5 20
I VUC OL P	7700		H Head &	
(This space for State use)	/ **	TLE		DATE
THE AVER DO	UUO\TI	LE		
APPPROVED BYif any	<u>,                                    </u>			
Conditions of approval, if any	•			