

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO

Form C-103
Revised 10-1-73

NOV 7 1979

B.G.C.

ARTESIA, OFFICE

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 DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Ralph Nix	8. Farm or Lease Name SEANNA
3. Address of Operator Box 617, Artesia, New Mexico 88210	9. Well No. 1
4. Location of Well UNIT LETTER A 330 FEET FROM THE North LINE AND 990 FEET FROM THE East LINE, SECTION 12 TOWNSHIP 8-S RANGE 28-E NMPM.	10. Field and Pool, or Wildcat Undesignated SA
15. Elevation (Show whether DF, RT, GR, etc.) 4065 GL	12. County Chaves

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 JOBS <input checked="" 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.

Ran 2796' of 4½" used J55, 10½# casing. Cemented with 250 sacks class C, 50/50 Poz with 2% gel, 8# salt, ¼# floccete. Plugged down at 5:00 p.m. (10/30/79).

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

SIGNED William J. McLean TITLE Operations Manager DATE 11/2/79

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE NOV 8 1979

CONDITIONS OF APPROVAL, IF ANY: