Submit 3 Copies to Appropriate

State of New Mexico Energ linerals and Natural Resources Department

Form C-103
Revised 1.1.9

District Office	and Natural Resources Department	Revised 1-1-89
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 OIL CONSI	ERVATION DIVISION	WELL ADVANCE
W	P.O. Box 2088	WELL API NO.
P.O. Drawer DD, Artesia, NM 88210 Santa Fe, I	New Mexico 87504-2088	30-005-60642
DISTRICT III		5. Indicate Type of Lease STATE FEE XX
1000 Rio Brazos Rd., Aztec, NM 87410		6. State Oil & Gas Lease No.
		Silver State Delact Tree
SUNDRY NOTICES AND REPORT	RTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL O DIFFERENT RESERVOIR. USE "APPLIC	OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PRO	POSALS)	
1. Type of Well:		-
OIL GAS WELL G	THER	MARTIN
2. Name of Operator		
C.E. LARUE & B.N. MUNCY, JR.		8. Well No.
3. Address of Operator		9. Pool name or Wildcat
PO BOX 1370 ARTESIA, NM 8821	1-1370	WILDCAT (SAN ADRES)
4. Well Location		, , , , , , , , , , , , , , , , , , , ,
Unit Letter L : 2310 Feet From The	SOUTH Line and 330	Feet From The WEST Line
		Feet From the Line
Section 20 Township	7S Range 29E	NMPM CHAVES County
//////////////////////////////////////	on (Show whether DF, RKB, RT, GR, etc.)	V/////////////////////////////////////
11. Check Appropriate Box	to Indicate Nature of Notice, R	eport, or Other Data
NOTICE OF INTENTION TO:		SSEQUENT REPORT OF:
		OLGOLIN HEI ONI OF:
PERFORM REMEDIAL WORK PLUG AND ABA	ANDON K REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLAN	S COMMENCE DRILLING	
r	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND C	EMENT JOB
OTHER:	OTHER:	
 Describe Proposed or Completed Operations (Clearly state all pework) SEE RULE 1103. 	ertinent details, and give pertinent dates, inclu	iding estimated date of starting any proposed
,		
PULLED 493' CASING. PROPOSE T	O ATTEMPT TO GET BACK IN	TO THE TOP OF THE CASING AND SET
THE FOLLOWING CEMENT PLUGS:		
2) 07		
1) 25 SACKS PLUG 2600' TO 2500		
2) 35 SACKS PLUG 543' TO 443';		14 0 KG
3) 35 SACKS PLUG 275' TO 175';	TAG	Q at the state of
4) 10 SACKS PLUG AT SURFACE		
MID DEMINEDN ALL DILICO TAXONA		
MUD BETWEEN ALL PLUGS. INSTAL	L DRY HOLE MARKER	
I hereby certify that the information above to true and complete to the best of	my knowledge and belief.	
	OPERATOR	7 5 05
SIONATURE	TITLE OPERATOR	DATE1-5-95
TYPE OR PRINT NAME C.E. LARUE		TELEPHONE NO. 505—746—66
		ASSETTATION OF THE PROPERTY OF

SIGNATURE

TITLE OPERATOR

DATE 1-5-95

TYPE OR PRINT NAME C.E. LARUE

TELEPHONE NO. 505-746-66

(Thus space for State Use)

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE 1-5-95

THE DATE 1-5-95

TITLE DATE 1-5-95

CONDITIONS OF APPROVAL, IF ANY: