

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-005-60642
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name MARTIN
8. Well No. 1
9. Pool name or Wildcat WILDCAT (SAN ADRES)
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
C.E. LARUE AND B.N. MUNCY, JR.

3. Address of Operator
PO BOX 1370 ARTESIA, NM 88211-1370

4. Well Location
Unit Letter L : 2310 Feet From The SOUTH Line and 330 Feet From The WEST Line
Section 20 Township 7S Range 29E NMPM CHAVES County

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

AT 2600' SET 25 SX CLASS C CEMENT PLUG. TAGGED AT 2310'.
AT 543' SET 35 SX CLASS C CEMENT PLUG W/2% CaCl. TAGGED AT 416'.
AT 275' SET 35 SX CLASS C CEMENT PLUG W/2% CaCl. TAGGED AT 162'.
AT 30' SET 10 SX CLASS C CEMENT PLUG AND CIRCULATED.
SET DRY HOLE MARKER.
CUT OFF DEAD MEN.
CLEANED LOCATION AND MOVED OFF LOCATION.

RECEIVED

MAR 28 1995

OIL CON. DIV.
DIST. 2

Post ID-2
4-7-95
Puff

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

SIGNATURE [Signature] TITLE OWNER DATE 3-27-95

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep 1 DATE 3-27-95

CONDITIONS OF APPROVAL, IF ANY: