Form C-103 Revised 1-1-89

FEE X

Line

County

State of New Mexico Submit 3 Copies to Appropriate District Office erals and Natural Resources Department Energy, OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-005-60711 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE 1000 Rio Brazos Rd., Aztec, NM 87410 6. 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: WELL X GAS WELL SIDNEY Name of Operator 8. Well No. C.E. LARUE & B.N. MUNCY, JR. Address of Operator 9. Pool name or Wildcat WILDCAT (SAN ADRES) PO BOX 1370 ARTESIA, NM 88211-1370 Well Location 2310 WEST Unit Letter F : 1650 Feet From The NORTH Line and Feet From The Township 8S 28E CHAVES Range NMPM 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING 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.

TAGGED AT 1880'. AT 2050' SET 25 SX PORTLAND CEMENT PLUG. TAGGED AT 420'. AT 542' SET 35 SX PORTLAND CEMENT PLUG. TAGGED AT 145'. AT 270' SET 35 SX PORTLAND CEMENT PLUG.

AT 30' SET 10 SX PORTLAND CEMENT PLUG.

CIRCULATED CEMEN

CLEANED UP LOCATION. CUT OFF DEAD MEN. MOVED OFF LO

MAR 2 8 1995

OIL CON. DIV.

DIST. 2

I hereby certify that the information above is true and complete to the best of r	my knowledge and belief. TITLE OWNER	3-27-95
TYPE OR PRINT NAME		TELEPHONE NO.
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TILE FIELD Rep 1	DATE 6-6-95