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RECEIVED BY P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
MAR - 1 1985
O. C. D.
ARTESIA, OFFICE

5a. Indicate Type of Lease
State Fee
5. State Oil & Gas Lease No.
V-1361

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.)

OIL WELL GAS WELL OTHER

7. Unit Agreement Name

8. Farm or Lease Name
Latham-State

9. Well No.
1

10. Field and Pool, or Wildcat
Brown-Queens

11. Location of Well
UNIT LETTER P 330 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 25 TOWNSHIP 10-South RANGE 26-East NMPM.

12. County
Chaves

15. Elevation (Show whether DF, RT, GR, etc.)
3705 GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 JOB <input 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.

Plan to drill out cement plug at 675' and clean out hole to 900'. Intend to perforate Queens--Grayburg zone from 826' to 836' w/2 SPF and acidize interval with 500 gallons of 15% Spearhead acid. Then plan to swab test well for commercial rate. If well proves commercial, will run rods and pump test.

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

SIGNED Leslie A. Clements TITLE Vice-President DATE February 26, 1985

APPROVED BY Leslie A. Clements TITLE Supervisor District II DATE MAR 11 1985

CONDITIONS OF APPROVAL, IF ANY: