

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
RECEIVED
SEP 11 1980
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Ralph Nix	8. Farm or Lease Name O'Brien
3. Address of Operator P.O. Box 617, Artesia, New Mexico 88210	9. Well No. 1
4. Location of well UNIT LETTER <u>N</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>1</u> TOWNSHIP <u>8S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Undes. Bull's Eye SA
15. Elevation (Show whether DF, RT, GR, etc.) 4053' 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 type="checkbox"/>	OTHER <u>Treatment</u> <input checked="" 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.

8/25/80 Treated with 3,000 gallons of 20% Stable Gelled Acid, containing 750 SCF/BBL of Nitrogen. Ran in hole with RTTS to 2608.68' and spotted 1 barrel of acid. Pulled up to 2559.65' & set packer & acidized.

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

SIGNED Ralph Nix TITLE Operations Manager DATE 9/10/80
APPROVED BY W. A. Gussitt TITLE SUPERVISOR, DISTRICT II DATE SEP 12 1980
CONDITIONS OF APPROVAL, IF ANY: