

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

DEC 12 1983

O. C. D.
ARTESIA OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. 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 DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL <input checked="" type="checkbox"/> WELL GAS <input type="checkbox"/> WELL OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator O.I.L. Energy, Inc. ✓	8. Farm or Lease Name J. O'Brien '25'
3. Address of Operator P.O. Box 802405, Dallas, Texas 75380	9. Well No. 1
4. Location of Well UNIT LETTER <u>L</u> <u>1780</u> FEET FROM THE <u>S</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>25</u> TOWNSHIP <u>7S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Wildcat San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4079.4 GL	12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIATION WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <u>Setting CIBP</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.

Set CIBP in 9-5/8" csg at 2630' KB

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 Drilling Technician DATE 12-2-83
APPROVED BY _____ TITLE Original Signed By
Leslie A. Clements
Supervisor District II DATE FEB 16 1984

CONDITIONS OF APPROVAL, IF ANY: