

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

RECEIVED

WELL API NO.	30-005-62177
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	LG - 7986
7. Lease Name or Unit Agricultural Name	Pioneer 26 State
8. Well No.	#1
9. Field Name or Wildcat	

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Manzano Oil Corporation ✓ 505/623-1996	
3. Address of Operator P.O. Box 2107/Roswell, NM 88202-2107	
4. Well Location Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line Section 26 Township 8 S Range 27 E NMPM Chaves County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3912.8 GR	

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: Correction of Lease Number <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input 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.

State Lease number has been submitted incorrectly on previous forms and notices.
Lease number reported as: LG-7985.
Lease number should be: LG-7986.

Please note this change in your records.

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

SIGNATURE Sharon M. Williams TITLE Production Department DATE 3-22-90
TYPE OR PRINT NAME Sharon M. Williams, Manzano Oil Corporation TELEPHONE NO. 505-623-1996

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE MAR 28 1990

CONDITIONS OF APPROVAL, IF ANY: