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Submit 3 Copies To Appropriate District State of New Me	xico Form C-103
District I Energy, Minerals and Natu	ral Resources Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO. 30-015-01721
Bill South First, Artesia, NM 88210OIL CONSERVATIONDistrict III2040 South Pach	DIVISION 5 Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV South Pach Santa Fe, NM 87	STATE STATE I
District IV Sailta FC, INIV 87505 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B2071	
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO	
1. Type of Well:	
Oil Well Gas Well Other	
2. Name of Operator Vintage Drilling LLC	8. Well No. 4
3. Address of Operator	9. Pool name or Wildcat
P.O. Box 158 Loco Hills, NM 88255 4. Well Location	ARTESIA QNGRSA
Unit Letter <u>K</u> : <u>1650</u> feet from the <u>South</u>	ine and <u>2310</u> feet from the <u>West</u> line
Section 34 Township 17S	Range 28E NMPM Eddy County
10. Elevation (Show whether DF 3663	R, RKB, RT, GR, etc.) C L
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. C PLUG AND ABANDONMENT
PULL OR ALTER CASING DULTIPLE COMPLETION	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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	
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1/16/01 thru 1/22/01	
Tried to change pump rods, parted @ 1520'.	
Tried to pull tubing, parted @ 1420'. Tried to fish tubing, casing grown up, could not get down with fishing tool.	
Cleaned hole out with reverse rig to fish.	
Washed over fish and ran overshot. Tried to run fishing socket to get r	ods, could not get to fish.
Tubing pulled into again. Repeated process, same results.	
Called OCD for permission to plug well.	E REAM
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE (1020 Month TITLE	Secretary DATE 02/09/01
Type or print name Marie Durham	Telephone No. 505-748-2941
(This space for State use)	
APPPROVED BY Mess willing TITLE	rield Rep. II DATE 2/22/01
Conditions of approval, if any:	