Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-103
Revised 1-1-89

District Office	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION D	OIVISION WELL API NO.
P.O. Box 2088	30-015-02824
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 8750	5. Indicate Type of Lease
DISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410	AUG 26.'94 6. State Oil & Gas Lease No.
	E-785
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	C. C. D. AMBEBACKOFENGE 7. Lease Name or Unit Agreement Name
. Type of Well:	
WELL X WELL OTHER	HOLLIS
Name of Operator C.E. LARUE	8. Well No.
. Address of Operator	9. Pool name or Wildcat
PO BOX 470 ARTESIA, NM 88211-0470	
. Well Location	SQUARE LAKE GRAYBURG SAN ANDRE
Unit Letter I : 1980 Feet From The SOUTH	Line and 660 Feet From The EAST Line
Section 36 Township 16S Range	29E NMPM EDDY County
10. Elevation (Show whether DF, RK	(B, RT, GR, etc.)
1. Check Appropriate Box to Indicate Natur	re of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
ERFORM REMEDIAL WORK PLUG AND ABANDON REM	MEDIAL WORK X ALTERING CASING
EMPORARILY ABANDON CHANGE PLANS CON	MMENCE DRILLING OPNS. PLUG AND ABANDONMENT
ULL OR ALTER CASING CAS	SING TEST AND CEMENT JOB
OTHER:	HER:
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.	
7-30-94 PULLED 65 RODS OUT. HOT WATERED DOW	N TUBING. PULLED REMAINING RODS & PUMP
	ASING FLOWING & UNABLE TO KILL BACKSIDE.
	PARAFFIN STILL IN TUBING. SHUT WELL
IN AND SHUT DOWN.	
8-1-94 OPENED WELL. CUT PARAFFIN DOWN TO S	
OUT. BURNED AND CLEANED PERFS-12' MUD ANCHO	
	C. CLEAR FROM PARAFFIN. RAN NEW PUMP AND
	PUMP ACTION. RIGGED DOWN AND CLEANED
LOCATION.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE CACY MILE	LEASE RECORDS 8-24-94
TYPE OR PRINT NAME TRACY SMITH	TELEPHONE NO. 505-746-66
(This space for State Use)	007 4 4 400
SUPERVISOR, DISTRICT H	OCT 1 1 1994

- DATE -

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY -