Submit 3 Copies to Appropriate District Office		lew Mexico tural Resources Departmen	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		ATION DIVISION ox 2088	WELL API NO. 30–105–03960
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New M	exico 87504 2088	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		RECEIVED	6. State Oil & Gas Lease No. NMO4712
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE (FORM (TICES AND REPORTS OF COPOSALS TO DRILL OR TO DE PRIOR. USE "APPLICATION F C-101) FOR SUCH PROPOSAL	DEEPEN OR PLUG BACK TO A TO THE STATE OF THE	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL WELL] слнея	INJECTION	FEDERAL E
2. Name of Operator C E LaRUE & B N MUNCY	JR.		8. Well No.
	SIA, NM 88211-1370)	9. Pool name or Wildcat SQUARE LAKE GRAYBURG SAN ANDRES
4. Well Location Unit Letter F : 19	80 Feet From The N	Line and 1977	. 28 Feet From The W Line
Section 31	Township 16S	Range 30E	NMPM EDDY County
	10. Elevation (Show 3708	whether DF, RKB, RT, GR, etc.) GR	
11. Check NOTICE OF IN	44 4	licate Nature of Notice, I	Report, or Other Data BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	IG OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	CEMENT JOB
OTHER:		OTHER:	
 Describe Proposed or Completed Ope- work) SEE RULE 1103. 	rations (Clearly state all pertinent	details, and give pertinent dates, inc	luding estimated date of starting any proposed
RAN TUBING	AND PACKER. PUT W	ELL BACK TO INJECTI	NG 3/5/02. TESTED WITH CHART
3/14/02. I	NJECTING APPROXIMA	TELY 25 BBLS. PRES	SURE IS 1400 psi.
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hereby certify that the information above is true and complete	e to the best of my knowledge and belief. TITLE OWNER	DATE 3/15/02
TYPE OR PRINT NAME		TELEPHONE NO.
(This space for State Use)	Sild Sep	WAD 10 2000
APPROVED BY	TITLE	