Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088

WELL	API	NO.	

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Santa Fe. New Mexico 87504-2088

30015048020051 5. Indicate Type of Lease 1000 Rio Brazos Rd., Aztec, NM 87410 FEE 6. 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" 7. Lease Name or Unit Agreement Name (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: North Square Lake Premier Unit WELL X OTHER 2. Name of Operator Walsh & Watts Inc. 8. Well No. Address of Operator 1111 Seventh Street, Wichita Falls, TX 76301 9. Pool name or Wildcat Well Location Square Lake (G/SA) North Unit Letter W: 660 Feet From The South Line and 1980 \_ Feet From The \_\_\_East Section Township Range Eddy 10. Elevation (Show whether DF, RKB, RT, GR, etc.) County 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 **ALTERING CASING** TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT X PULL OR ALTER CASING 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 Set 4½ C.I.B.P at 3350', Spot 14 sacks cement on top of C.I.B.P. 2) Load hole with mud Perforate casing at 1900', unable to pump into perforations, talked to N.M.O.C.C. Ray Smith; he ok'd to spot cement aeruss perforations at 1900', spot 25 sacks cement at 1950' Perforate casing at 1300', squeeze 50 sacks cement at 1500 psi, shut in pressure W.O.C, Perforate casing at 285' circulate cement to surface between 4½ & P Job completed 8/16/95 6)

I hereby certify that the infermation above is true and complete to the best of my knowledge and belief. SIGNATURE . mmma Manager, Pride P & A Div. DATE 8/22/95 TYPE OR PRINT NAME (This space for State Use)

CONDITIONS OF AFTROVAL, IF ANY: