	$\mathcal{U}_{\mathcal{X}}$
Submit 3 Copies To Appropriate District Office District I  RECEIVED State of New Me Office Office District I  RECEIVED Minerals and Nature	ral Resources Revised Walch 25, 1999
1625 N. French Dr., Hobbs, NM 88240	2- 55 47370
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION	5 Indicate Type of Lease
District III 1220 South St. Fran	cis Dr. STATE 🔀 FEE 🗌
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	NM026418
87505 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 PLUDIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)	Northeast Square Large Unit
1. Type of Well:	
Oil Well Gas Well Other In Ection	8. Well No.
2. Name of Operator AGHORN OPERATIVE, Jrc.	0
3 Address of Operator	9. Pool name or Wildcat
1.0. DOX 100 0 DOUS.	19768 NE Square Larke
4. Well Location	
Unit Letter C: 660 feet from the North line and 1980 feet from the WEST line	
Section Township \6 S Range 3\E NMPM EODY County	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate N	lature 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
PULL OR ALTER CASING MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB
OTHER:	OTHER: temporarily Abandones 3
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.	
Well failed mechanical integraty test.	
Killed well of 10# brine. POOH w/ injection string And ptr.	
RIHW RBP And set @ 39001. Dump 15x 5And on plug.	
Pump in leak of 1/4 BPM. Spot 5 Bbi polymer pill Across	
Squeeze polymer into lance 14 BPM, 500 psc. Flush to 800	
SEcure well head. Shut well in . Clean location.	

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

SIGNATURE

TITLE PRESIDENT

DATE 1/30/02

Type or print name

Fro Shu Gi NIAM, Jc.

Telephone No. 915 500 0804

(This space for State use)

DENIED - REFERENCE NMDCD RULE
19.15.D.203 AND 19.15.9.705

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