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Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources Department		=	Form C-103 Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NIM 88240	OIL CONSERVATION DIVISION 310 Old Santa Fe Trail, Room 206		WELL AFI NO. 30-015-04917	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mex	29101112	5. Indicate Type of Lease	FEDERAL
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	2 4 1011 12 13 12 15 15 15 15 15 15 15 15 15 15 15 15 15		6. State Oil & Gas Lease No.	
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE	TCES AND REPORTS ON WE OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS	TOH SPECIAL TOWN	7. Lesse Name or Unit Agreem Formerly: Texas	
1. Type of Well: OIL OAS WELL XX WELL	OTHER OF	300000	NORTH SQUARE LAK	_
2. Name of Operator		C0262626	8. Well No.	
GP II ENERGY, INC.			9. Pool name or Wildcat	
3. Address of Operator PO Box 50682	Midland, Texas 797	/1·0	Square Lake (Gray	burg SA)
4. Well Location	Hittant, Texto 131		T Dquare Zune (cas)	
Unit Letter N : 66	50 Feet From The South	Line and198	80 Feet From The	West Line
Section 29	Township 16S		NMPM Eddy	County
	3931' GR	er DF, RKB, RT, GR, etc.)		
11. Check	Appropriate Box to Indicate	Nature of Notice, Re	eport, or Other Data	
NOTICE OF IN		SUB	SEQUENT REPORT	OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUGAND	ABANDONMENT _
PULL OR ALTER CASING		CASING TEST AND CE		K X
OTHER:		OTHER:	ORARY ABANDONMENT	
12. Describe Proposed or Completed Open work) SEE RULE 1103.	stices (Clearly state all persinent details	, and give pertinent dates, incl	uding estimated date of starting a	ny proposed
THIS WELL IS NOW	PART OF THE "NORTH SQ	UARE LAKE UNIT".	•	
THERE IS A POSSI	BILITY THAT THIS WELL	BORE COULD BE USE	D AS AN INJECTOR FO	OR THEBUNIT.
WE ARE REQUESTING	G A 1 YEAR (1-YR) ENTE	NSION OF APPROVAL	FOR TEMPORARY ABAN	NDONMENT.
Requirement for	TA STATUS.			
7	100 above Top Pert	foration.		42.4
MIT ran on co	asing. Min. test pros	sure 300 F for	30 minuate test	period.
Recorded on ch	art Recorder.			<i>'</i>
I bereby certify that the information above is tru	e and complete to the best of my knowledge and	belief.		00.00.00
SIGNATURE QUELY	Without &	musPresid	lent DATE -	09-29-00
George	P. Mitchell II		TELEPHONE NO. 915-684	-4748 Ext.4
TYPE OR PRINT NAME				

(This space for State Use)

TYPE OR PRINT NAME

me Field Rep. I

CONDITIONS OF APPROVAL, IF ANY: