Submit 3 Copies to Appropriate
District Office

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

Form C-103	6
Revised 1-1-5	39

**DISTRICT I** 

TEMPORARILY ABANDON

**PULL OR ALTER CASING** 

CONDITIONS OF APPROVAL, IF ANY:

OTHER:

P.O. Box 1980, Hobbs, NM 88240

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 RECEIVED WELL API NO. 30-015-23936 5. Indicate Type of Lease

I	DISTRICT III						****			ST	ATE	FEE
	000 Rio Brazos Rd	., Aztec, NM 8	37410				JUN	1 8 1991	6. State Oil &	Gas Lease N	).	
	( DO NOT USE TI	HIS FORM FO	OR PROPOS RESERVOI	S AND REPO SALS TO DRILL R. USE "APPL FOR SUCH PI	OR TO D	EEPEN OR PER	OR PAHO BA	C. D. KKOPING	7. Lease Name	or Unit Agre	ement Name	
1.	. Type of Well: OIL WELL		r 🗆		OTHER		ection	Well	Red	Lake 1	Unit	
2	. Name of Operato Beach	Explora	tion,	Inc.					8. Well No.	7		
3.	Address of Open	Marier	feld S	Ste. 200	Midl	and,	Texas	79701	9. Pool name of Red	Wildcat Lake,	East	
4.	. Well Location Unit Letter	<u>G</u> :.	2310	Feet From The	Nort	h	Line as	1980	Feet Fi	Eas	st	Line
	Section	25		Township	16S	Ran	ge		IMPM	Eddy		County
				10. Eleva	tion (Show	whether [	OF, RKB, RT, C	GR, etc.)				
11	Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:											
PE	RFORM REMEDI	AL WORK		PLUG AND A	BANDON	$\sqcap$	REMEDIAL	WORK		AI TEDIN	IG CASING	

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB Packer Leakage Test

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.

**CHANGE PLANS** 

5-08-91 Ran 50 jts. of 2 3/8" tbg. and 5 1/2" Model AD-1 Tension packer, Set pkr. @ 1650.02'. Test witnessed and approved by Johnny Robinson, chart attached. Began injection 6-7-91.

OTHER:

PLUG AND ABANDONMEN

I hereby certify that the inform	nation above is true and complete to the best of my knowledge and belief.	Production	6-14-91		
TYPE OR PRINT NAME			TELEPHONE NO.		
(This space for State Use)	ORIGINAL SIGNED BY		JUL n 9 1991		
APPROVED BY	SUPERVISOR, DISTRICT # TITLE		DATE		

