Form 3160-5 234567897077 UNIT	Oil red states	Cons. FORM APPROVED
BURNAU OF L	AND MANAGEMENT  AND REPORTS ON WELLS  III or to deepen or reentry to a different reservoir.	6 If Indian Allotten on Triba Name
Do nortuse this total to propose is to dri	R PERMIT—" for such proposals	
01557350	IN TRIPLICATE	7. If Unit or CA, Agreement Designation
I Type of Well Oil Well Well Other		8. Well Name and No.
2. Name of Operator	. /	W D McIntyre E #2
	nergy Corporation	9. API Well No. 30-015-04228
P.O. Box 960, Artesia, NM 88211-0960 (505)748-1288  4. Location of Well (Footage, Sec., T. R., M. or Survey Description)		10. Field and Pool, or Exploratory Area  Grbg Jackson SR Q Grbg SA
2310 FSL & 1650 FWL, Sec. 20 T17S R30E		11. County or Parish, State
		Eddy, NM
12. CHECK APPROPRIATE BOX(	(s) TO INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	1
give subsurface locations and measured and true verti	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Other Upertinent details, and give pertinent dates, including estimated date of startical depths for all markers and zones pertinent to this work )*  ugging. Please consider this as final abandonment and	
14. I hereby certify that the foregoing is true and correct/	Production Analyst	Date4/18/02
(This space for Federal or State office use)	2 1 1 4 A	W1.2/20
Approved by ORIG. SGD.) JOE G. Conditions of approval, if any:	Title	Date