		-			
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DISTRIBUTION			RECEIVED BY	Form C-103 Supersedes Old	
ANTA FE		NEW MEXICO OIL CONSE	VA TÅRALCOMMUNGOM	C-102 and C-103	
FILE		THE MEXICO OF COMME	TOWN TOWN	Effective 1-1-65	
J.S.G.S.			O. C. D.	5a. Indicate Type of Lease	
AND OFFICE			artesia, office	State Fee	•
PERATOR		1	MINESON, OFFICE	5. State Oil & Gas Lease No.	
(DO NOT USE THIS FOR USE *	SUNDRY NOTIC M FOR PROPOSALS TO C APPLICATION FOR PER	ES AND REPORTS ON WARLL OR TO DEEPEN OR PLUG BACK	ELLS k to a different reservoir. Proposals.)		
OIL X GAS WELL	\Box			7. Unit Agreement Name	
Name of Operator	OTHER-		······································	8. Farm or Lease Name	
•					ı
Damson U11 Address of Operator	Corporation			30227	ed.
·	10/60 Midlan	d, Texas 79710		5	eu.
Location of Well	00400, Midian	u, 1exas /9/10		10. Field and Pool, or Wildcat	
				10, -1 concerta	
UNIT LETTER	·	FEET FROM THE	LINE AND FEET FROM	" Thin thin this	
THEL()	SE SECTION	TOWNSHIP	RANGE NMPM.		
	VE, SECTION	TOWNSHIP	RANGENMPM.		
		15. Elevation (Show whether DF	, RT, GR, etc.)	12. County	
j, (Check Appropria	te Box To Indicate Nat	ure of Notice, Report or Otl	ner Data	
	E OF INTENTION			REPORT OF:	
ERFORM REMEDIAL WORK		PLUG AND ABANDON . R	EMEDIAL WORK	ALTERING CASING	
EMPORARILY ABANDON		0	OMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
ULL OR ALTER CASING		CHANGE PLANS	ASING TEST AND CEMENT JOB		
			OTHER Reinstatement of	allowables	
OTHER					
. Describe Proposed or Com	pleted Operations (C.	learly state all pertinent details	, and give pertinent dates, including	estimated date of starting any proposed	
work) SEE RULE 1103.					
Gravburg Jackso	n-Seven Rive	rs-Queen-Grayburg-S	an Andres		
		, , , , , , , , , , , , , , , , , , , ,			
Berry A. Federa	1	Daily		Daily	
C 21-17-30		Production	Jenkins B. Federal	Production	
Well No.	1	3 2.5 BBls Oil	D 20-17-30		
	5	12 11.2 " "	Well No.	2 3 2.3 Bbls. 0il	
F 21-17-30				5 6 5.7 " "	
Well No.	2	2.0 " "	C 20-17-30	*	
	4	6-5-85" "	Well No.	3 3-2-9 " "	
E 21-17-30				6 g 7.6 " "	
Well No.	3	4 3.4 " "	F 20-17-30		
•	6	14.0 " "	Well No.	4 2 1.7 " "	
				√ \	
				[N]	
				IIX	
, I hereby certify that the inf	ormation above is tru	e and complete to the best of m	y knowledge and bellef.		
() .	. 1	J			
INED Manum	as the	Prod	uction Clerk	DATE 1/20/84	
			, ,d		
'OVED BY		TITLE	a retuit	DATE	
ITIONS OF APPROVAL,	IF ANY:		2/10/19		
er merne	.	J			
		1,		•	