

Submit 3 Copies
to Appropriate
District Office

clst
up

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

| |
|---|
| WELL API NO. 30-015-27103 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMITS (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Fina Oil and Chemical Company

3. Address of Operator
P.O. Box 2990, Midland, Texas 79702

7. Lease Name or Unit Agreement Name
Muskegon 16 State Com

8. Well No.
1

9. Pool name or Wildcat
Empire South Morrow

4. Well Location
Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line
Section 16 Township 17S Range 29E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3577 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: <input type="checkbox"/> | |

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.

Drilling was commenced @ 7:00 pm 10/4/92.

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

SIGNATURE Neva Herndon TITLE Petrotechnical Associate DATE 03/16/93
 TYPE OR PRINT NAME Neva Herndon TELEPHONE NO. 915-668-0608

(This space for State Use)

APPROVED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE _____ DATE MAY 28 1993

CONDITIONS OF APPROVAL, IF ANY:

gr
3/16/93