04567897017 <sub>72</sub>	C110
Submit 3 Coning To Appropriate District	Form C-103
Office District I  Office District I	Revised March 25, 1999 WELL API NO.
District II	30-015-00220
811 South First, Artesia, NM 8210  District III  CO. OCD - ARTESIA ONSIR VATION DIVISION  2640 South Pacheco	5. Indicate Type of Lease
District IV  ARTESIA  2640 South Pacheco  2650 South Pacheco  Santa Fe, NM 87505	STATE X FEE
2040 South Pacheco, Santa Fe, NN 97505	
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 PERMIT" (FORM C-101) FOR SUCH  PROPOSALS.)	7. Lease Name or Unit Agreement Name:
1. Type of Well:   Oil Well	EGGER
2. Name of Operator	8. Well No.
LOUIS FULTON dba CFM OIL COMPANY  3. Address of Operator	9. Pool name or Wildcat
P.O. BOX 1176 ARTESIA, NM 88211-1176 4. Well Location	ATOKA SAN ANDRES
Unit Letter G: 1650 feet from the NORTH line and 2310 feet from the EAST line	
	NMPM County EDDY
Section 22 Township 18 Range 26 N	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR	RILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTIPLE CASING TEST A COMPLETION CASING TEST A	
OTHER: OTHER:	
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	
Shoot off 3½" liner at 1600 ft. and pull Set 25 sack plug over botton perforation at 1775 ft. — 749 Bail hole dry and fill with ready mix or cement slury	
Notify OCD 24 hrs. prior to any work done	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE OWNER DATE 3-5-02	
The N/FOE 746 4707	
Type or print name LOUIS FULTON (This space for State use)	1) a 1P
APPPROVED BY TITLE DATE DATE	
Conditions of approval, if	<b>1</b>