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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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MAR 22 1983

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
E-1287	

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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- ARTESIA, OFFICE		7. Unit Agreement Name
2. Name of Operator Collier Energy, Inc. ✓		8. Farm or Lease Name Mesa FAF
3. Address of Operator P.O. Drawer R, Artesia, New Mexico 88210		9. Well No. #1
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 23 TOWNSHIP 18S RANGE 28E NMPM.		10. Field and Pool, or Wilcat Artesia Queen GR. SA
15. Elevation (Show whether DF, RT, GR, etc.) 3507 GR		12. County Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

Well has been shut-in for several years.
Propose to set BP @ 2310' & cap w/10' cement.

Perforate 12 holes 2207-24 & treat w/1000 gals acid & frac w/approximately 20,000 gals water & 30,000 # sand and return to production.

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

SIGNED <u>Leslie A. Clements</u>	TITLE <u>Production Clerk</u>	DATE <u>3-22-83</u>
Original Signed By Leslie A. Clements		DATE <u>MAR 24 1983</u>
APPROVED BY _____	TITLE <u>Supervisor District II</u>	
CONDITIONS OF APPROVAL, IF ANY:		