1					_		
1	Submit 3 Copies to Appropriate District Office		State of New Mexico regy rerals and Natural Resources D		CLS	Form C-103 Revised 1-1-8	9
	<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088			WELL API NO.	21/40	
	DISTRICT II P.O. Drawer DD, Artesia, NM 88210				30-015- 5. Indicate Type	of Lease	EE
	DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & G		
í	SUNDOVINOTI	IOSO AND DEPORTO	ONINGELL		V/////////////////////////////////////		
	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"				7. Lease Name or Unit Agreement Name		
	(FORM C-101) FOR SUCH PROPOSALS.)				ADTECTA	STATE UNIT	
	1. Type of Well: OIL GAS.	OTHER	Tudask		AKIESIA		
	WELL WELL SELECTION WE WELL SELECTION WELL SELECTIO	OTHER	Injecto	or	8. Well No.	TRACT 9	
ĺ	GP II ENERGY, INC.				002		
1	3. Address of Operator				9. Pool name or	Wildcat	
	PO Box 50682	Midland, Texas	79710		ARTESIA Q	UEEN	
•	4. Well Location						
		10 Feet From The Nor		Line and1310			Line
	Section 23	Township 18-S		ge 27-E F, RKB, RT, GR, etc.)	NMPM	Eddy	County
			ow whether D	P, KKB, KI, GK, ElC.)			
-	Chaple	Appropriate Box to I		ature of Notice E	Penort or Othe		
	NOTICE OF INT		noncate 1		SEQUENT F		
	PERFORM REMEDIAL WORK	PLUG AND ABANDO	ж 🔲	REMEDIAL WORK		ALTERING CASING	
	TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLIN		PLUG AND ABANDON	MENT 📙
	PULL OR ALTER CASING		nz n[w]	CASING TEST AND C	EMENT JOB		
OTHER: PUT IN COMPLIANCE WHEN RIG AVAILABLE X 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.							
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						E. S.	
						Who the	
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	I hereby certify that the information above is tru	ue and complete to the best of my in	nowledge and b	did.			
	O to the Const			Production A	malvst	03-09-	2001
	SIGNATURE SIGNATURE	yu	m.	E		(915) 684-4748	
	TYPE OR PRINT NAME Tonya Ga	rza				TELEPHONE NO.	
	(This space for State Use)						
	Ramod O.Au			_		DATE 3/14/01	
	APPROVED BY TO COME TO STATE		— тп	E		DAIE /	
	CONDITIONS OF A DEPOCYAL TE ANY:						