STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMEN	17 -			
	JIL CONSERVA			
DISTRIBUTION	P. O. BO	Form C-103		
		Revised 10-1-78		
SANTA FE	SANTA FE, NEW			
have not been and the second s			5a, Indicate Type of Lease	
LAND OFFICE			State Fee X	
OPENATON 1			5. State Oli & Gas Lease No.	
orenation		FREIVED		
	NOTICES AND REPORTS ON OSALS TO DRILL ON TO DEEPEN OF PLUE DA ON POR PERMIT (FORM C-101) FOR SUC	WELLS	7. Unit Agreement Name	
	0TH EA +	1404 T 0 1919		
2. Name of Operator		O. C. C.	8. Farm or Lease Name	
Ralph Nix 🗸		ARTESIA, DFFICE	MERRI	
3. Address of Operator			9. Well No.	
P.O. Box 617, Art	tesia, New Mexico 88	8210	1	
4. Location of Well J]	L980 South	1980	10. Field and Pool, or Widcat UND Dayton Abo	
Fact	34 18-5	S 26-E		
	12. County Eddy			
16. Check A	ppropriate Box To Indicate N	ature of Notice, Report or O	ther Data	
NOTICE OF IN	** *	-	NT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
OTHER		the sector is a sector of sector is a local	ar estimated date of starting any proposed	

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.

Rigged up well service unit, pulled rod & pump. Rigged up Dresser Atlas to run wire line bridge-plug. Plug set at 3790' tested plug to 3000 psi. Ran in hole with casing gun and perforated one shot at 3769', 3776, 3780, 3785'. Ran packer to 3720': Treated with 2000 gallons SGA acid and Ball Sealers. Swabbed well down. Recovered acid water, slight show of oil & gas. Unseated packer, pulled packer, ran tubing and rods. Started well pumping. Rigged up well service unit, pulled rods & tubing. Stimulated with 309 bbls. fluid,20 ton CO2 and 12,000# sand. Swabbed well down, unseated packer, pulled packer. Ran tubing, pump & rods. Started well pumping.

18. I hereby certify that the information above is true and complete to the best of my knowledge and helief.							
Netleni 7 Mm	TITLE	Operations Manager	DATE_	11/15/79			
APPROVED BY USA Gressett	TITLE	SUPERVISOR, DISTRICT, IL	DATE_	NOV 2 0 19 79			

CONDITIONS OF APPROVAL, IF ANY: