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RECEIVED BY BOX 2088  
SANTA FE, NEW MEXICO 87501  
DEC - 2 1985  
O. C. D.  
ARTESIA OFFICE

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. 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 PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator RALPH NIX <input checked="" type="checkbox"/>	8. Farm or Lease Name Merri Battery #2
Address of Operator P. O. Box 440, Artesia, New Mexico 88210	9. Well No. #3
Location of Well UNIT LETTER <u>0</u> <u>960</u> FEET FROM THE <u>South</u> LINE AND <u>2270</u> FEET FROM THE <u>East</u> LINE, SECTION <u>34</u> TOWNSHIP <u>18S</u> RANGE <u>26E</u> NMPM.	10. Field and Pool, or Wildcat Atoka/Glorieta/Yeso
15. Elevation (Show whether DF, RT, GR, etc.) 3349' GL	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

FORM 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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>cement job &amp; TD only</u> <input checked="" type="checkbox"/>

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.

1/25/85 FINAL TOTAL DEPTH: 4066' KB, 11-24-85 4:30 am  
RIH w/98 jts., 4051', 5 1/2", 15.5# LT&C csg: Set at 4056' KB.  
Run 1000 gals. Flocheck-21, cement w/300 sx Halliburton lite w/1/4# Flocele per sx, 400 sx 50/50 POZ "C" 2% gel w/.3% Halad 4, .2% CFR-3, 4# salt, 1/4# Flocele per sx. Plug down 3:50 pm 11-24-85. Circ. 20 sx to pit.  
Noe: Casing test to be reported at later date.

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

ED Earl Nix Jr TITLE \_\_\_\_\_ DATE 11/27/85  
Original Signed By  
Les A. Clements  
SUPERVISOR, DISTRICT II  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE DEC 5 1985  
CONDITIONS OF APPROVAL, IF ANY: