

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2008
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

JUL 26 '88

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
SWD-130

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Disposal Well	7. Unit Agreement Name
2. Name of Operator	Walter Solt State No. 1
I. & W, Inc. <input checked="" type="checkbox"/>	8. Farm or Lease Name
3. Address of Operator	Solt #1
P. O. Box 98, Loco Hills, New Mexico 88255	9. Well No.
4. Location of Well	1
UNIT LETTER "L" 2240' FEET FROM FSL ONE AND 40 FEET FROM	10. Field and Pool, or Wildcat
THE FWL LINE, SECTION 5 TO HIP 18-S RANGE 28-E NMPM.	Wolfcamp
15. Elevation: (Show whether D. T, GR, etc.)	12. County
3644.4' r.	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 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"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER run tubing, acidizing <input checked="" 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.

2-8-88 Run tbq. hit fill at 7468', circulate to 7830', pump packer fluid.
2-9-88 set packer at 7457', pump treatment of 500 gal. zeloline, 5000 Gal. 15% NE Acid.
Test to 500# W/ state man on location, held for 30 min.
Shut in waiting on battery to be build.

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

SIGNED Peggy L. Bell TITLE Office Mgr. DATE 7-23-88

APPROVED BY Mike Williams TITLE DATE DEC 6 1988

CONDITIONS OF APPROVAL, IF ANY: