Submit 3 Copies to Appropriate Dirura Office

State of New Mexico Minerals and Natural Resources Departme

Form C-103 Revised 1-1-89

CISF

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

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P.O. Drawer DD, Artesia, NM 88210

NM-06245

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 5. Indicate Type of Lease STATE FHEX 6. 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.)

7. Lease Name or Unit Agreement Name

Type of Well: On. WELL

WELL.

OTHER

TRIGG FEDERAL

9. Pool name or Wildeat

Name of Operator

RAY WESTALL

3. Address of Operator P.O. BOX 4 LOCO HILLS, NM 88255 & Well No.

Well Location

Unit Letter N : 1210 Feet From The SOUTH

2600 Line and

SHUGART 7RONGB

WEST

Section

Township

Range

30E

NMPM

188 10. Elevation (Show whether DF, RKB, RT, GR, etc.)

EDDY

Feet From The

11.

OTHER:

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

PERFORM REMEDIAL WORK

PLUG AND ABANDON

SUBSEQUENT REPORT OF:

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS.

ALTERING CASING

CASING TEST AND CEMENT JOB

PLUG AND ABANDONNE

PULL OR ALTER CASING

OTHER:_MIT

REMEDIAL WORK

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1103.

3/15/99 Pulled tubbing replace bad joint

3/16 Pressure test backside to 560 psi. Test witnessed by Van with NMOCD Barton

I hereby certify that the information above the best of my knowledge and belief. SIGNATURE mr Geologist **Harris** 8/27/99 TYPE OR FRINT NAME ANDALO TELEPHONE NO. (This space for State Use)

CONDITIONS OF APPROVAL, IF ANY:

DATE -

