+Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural Re	esources Department	CIST	Form C 103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM S8240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	OIL CONSERVATIO P.O. Box 208 Santa Fe, New Mexico	38	WELL API NO. 30 015 5. Indicate Type of Lease ST 6. State Oil& Gas Lease N	ATE FEE
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESEI	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PEF -101) FOR SUCH PROPOSALS.)	OR PLOG BACK TO A	7. Lease Name or Unit Agre	ement Name
Oil     Gas       Well     Well	OTHER	34265	State 647	AC 713
2. Name of Operator Melrose Operating Company			8. Well No. 140	
3. Address of Operator <u>c/o P.O. Box 953, Midland, TX</u> 4. Well Location Unit Letter <u>K</u> 1650		Line and 165	9. Pool name or Wildcat Artesia; QN 0' Feet From The	V-GR-SA West Line
Section 14	Township 18S Ra	nge 28E N	MPM Eddy	County
///////////////////////////////////////	10. Elevation (Show whether 3573' GR	DF, RKB. RT, GR, etc.)	///////////////////////////////////////	/////////
II. Check Z NOTICE OF INT	Appropriate Box to Indicate I FENTION TO:		eport, or Other Data SEQUENT REPOR	T OF:
	PLUG AND ABANDON	REMEDIAL WORK	ALTERI	
	CHANGE PLANS	COMMENCE DRILLING	OPNS. DLUG A	
PULL OR ALTER CASING	i	CASING TEST AND CEM		
OTHER:		OTHER		
<ol> <li>Describe Proposed or Completed Op work)SEE RULE 1103.</li> <li>Status of Well:</li> <li>8 5/8", 24# casing @ 385' w/375 sx</li> </ol>		and give pertinent dates, inclu	uding estimated date of starting	any proposed

8 5/8", 24# casing @ 385 w/375 sx cement, circulated to surface.
5 1/2", 14# casing @ 2950', w/900 sx cement, circulated to surface.
Well temporarily abandoned in January 2001. Propose to set CIBP @ 2250' and pressure test, T/A and evaluate for waterflood.

	Notify OCD <u>24 hours</u> prior to test. 748-1283	
TD.		
I hereby certify that the information above is frue and the let to the signature	he best of my knowledge and belief	DATE 11-20-02
TYPE OR PRINT NAME ANN E. Ritchie		TELEPHONE NO. 915 684-6381
(this space for State Use)	Juild App P	DEC 5 2002
APPROVED BY QCV Q	TITLE	DATE