Form C-103

.Revised 1-1-89

Submit 3 Copies to Appropriate

District Office

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

P. O. Drawer DD, Artesia, NM 88210 DISTRICT III DISTRICT III 5. Indicate Type of Lease State Oil & Gas Lease No. 20588 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 7. Lease Name or Unit Agreement Name 1. Type of Well: OTHER MCCall 0IL GAS MCCall WELL X WELL OTHER 2. Name of Operator 8. Well No. 1 3. Address of Operator 8. Well No. 1 3. Address of Operator 1650 Feet From The South Line and 330 Feet From The Unit Letter 10. Desta Dr., Suite 420E, Midland, TX 79705 Line and 26E NMPM 10. Elevation(Show whether DF, RKB, RT, GR, etc.) 10. Elevation(Show whether DF, RKB, RT, GR, etc.) 11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data ALTERING CASING PLUG AND ABANDON YULL OR ALTER CASING PLUG AND ABANDON CASING TEST AND CMT JOB X ALTERING CASING PLUG AND ABANDON	DISTRICT II	API NO. (assigned by OCD on New Wells) 30-025-29446			
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PULL OR ALTER CASING	TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABANDON.			
	PULL OR ALTER CASING				
OTHER:					

 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.

Spudded well @ 12:45 pm CDST 5/18/97.

Set 8-5/8" casing on May 23, 1997 @ 991' with 700 sxs cmt. and circ. 100 sx to surface. Witnessed by OCD representative. Test BOP to 900#.

woc. ? hy

Thereby certify that the information SIGNATURE	ion above is true and complete to the best of TITLE	ny knowledge and belief. Production Analyst	DATE	5/27/97	
TYPE OR PRINT NAME Bobbie Brooks		TELEPHONE NO. (915)685-1961			
ORIGINAL SIGNED BY TIM W. GUM		DATE	JUN 1 0 1997		
CONDITIONS OF APPROVAL,	IF ANY:		• •		