Submit 3 Copies to Appropriate District Office	State of New Energy, Minerals and Natural		cist		rm C-103 vised 1-1-89	
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVAT	WELL API NO.		<u> </u>		
	2040 Pacheco S Santa Fe, NM	30-015-31216				
DISTRICT II P.O. Drawer DD. Artesia, NM 88210	Santa i e, inivi	sIndicate Type of Lea				
					FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			₅State Oil & Gas Lea			
SUNDRY NOT		the second second				
(DO NOT USE THIS FORM FOR PRO	7Lease Name or Unit	7Lease Name or Unit Agreement Name				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)						
Type of Well:			Pathfinder 19 State Com			
OIL GAS WELL WELL	OTHER					
2Name of Operator Nearburg Producing Company			₀Well No. 1			
Address of Operator			Pool name or Wildcat			
3300 N A St., Bldg 2, Suite 120, M	Illinois Camp M	orrow, North (	Gas)			
-Well Location	Feet From The North	Line and 1295		East		
Unit Letter A : 000	Feet From The North	Line and 1295	Feet From The		Line	
Section 19	Township 18S	Range 28E	NMPM	Eddy	County	
Delevation (Show whether DF, RKB, RT, GR, etc.) 3598' GR						
<sup>11</sup> Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
			SEQUENT RE		:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CA	ASING	
TEMPORARILY ABANDON	CHANGE PLANS		OPNS.	PLUG AND AN	BANDONMENT	
PULL OR ALTER CASING		CASING TEST AND CEN	IENT JOB			
OTHER:		OTHER: Intermediate	e casing and ceme	nt	X	

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

06/08/01: Drilled 11" hole to 2608'. RU and ran 62 jts of 8-5/8", 32#, J55, ST&C casing to 2608'. Cement casing using 780 sx 35/65 poz "C" + additives and 200 sx "C" + additives. Circ 62 sx to surface. WOC for 24 hrs. Cut off csg and weld on well head. NU BOPE and test.

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(This space for State Use)	Original Signed by Tim W. Gum District II Supervisor Title		DATE JUL 0 6 2001
TYPE OR PRINT NAME KIM Stewart			TELEPHONE NO. 915/686-8235
SIGNATURE King 51	ewant	TITLE Regulatory Analyst	DATE 06-18-01
I hereby certify that the information above is	true and complete to the best	of my knowledge and belief.	