Submit 3 Copies to Appropriate	Fergy, Minerals and Natur	ral Resources Departme	Revised 1-1-89 C
District Office  DISTRICT I	OIL CONSERVATION DIVISION		WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box		x 2088 	30-015-21045
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mex			5. Indicate Type of Lease STATE THE FEE THE STATE STATE THE STATE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		APR 3 0 1991	6. State Oil & Gas Lease No. L4675
CUNDRY NOT	CES AND REPORTS ON	WEIARTENA OFFICE	
( DO NOT USE THIS FORM FOR PRODIFFERENT RESERVED	OPOSALS TO DRILL OR TO DE RVOIR. USE "APPLICATION FO -101) FOR SUCH PROPOSALS.	EPEN OR PLUG BACK TO OR PERMIT"	7. Lease Name or Unit Agreement Name Aikman State
1. Type of Well: OIL GAS WELL WELL		t Water Disposal	
2. Name of Operator			8. Well No.
Nearburg Producing C	ompany		1 SWD
3. Address of Operator P.O. BOX 823085, Dal	las, Texas 75382-3	3085	Undesignated
4. Well Location			non liest
Unit Letter N: 66	O Feet From The South		,980 Feet From The West Line
Section 27	Township 19S	Range 25E whether DF, RKB, RT, GR, etc.	NMPM Eddy County
	10. Elevation (Show w	GR	'
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS		COMMENCE DRI	LING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST A	ED CEMENT JOB
		OTHER: Cha	inge of lease name X
OTHER:			
12. Describe Proposed or Completed Operawork) SEE RULE 1103.	ations (Clearly state all pertinent de		including estimated date of starting any proposed  1 to Aikman State
12 Describe Proposed or Completed Opera- work) SEE RULE 1103.  Change of lease no Well No. 1 SWD	ame from Aikman Sta	te Com Well No.	
12 Describe Proposed or Completed Opera- work) SEE RULE 1103.  Change of lease no	ame from Aikman Sta	te Com Well No.	
12. Describe Proposed or Completed Operawork) SEE RULE 1103.  Change of lease not Well No. 1 SWD  Thereby certify that the information above is to SIGNATURE	ame from Aikman Sta	te Com Well No.	on Analyst DATE 4/30/91
12 Describe Proposed or Completed Opera- work) SEE RULE 1103.  Change of lease no Well No. 1 SWD	ame from Aikman Sta	te Com Well No.	1 to Aikman State
12. Describe Proposed or Completed Operawork) SEE RULE 1103.  Change of lease not Well No. 1 SWD  I hereby certify that the information above is to SIGNATURE MILDRED SIGNATURE SIGNAT	ame from Aikman Sta  we and complete to the boot of my know impkins  SIGNED BY	te Com Well No.	on Analyst DATE 4/30/91

CONDITIONS OF APPROVAL, IF ANY: