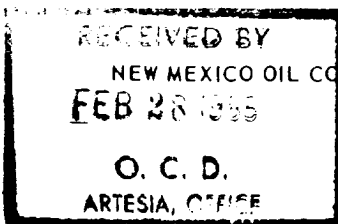


NO. OF COPIES RECEIVED	
DISTRIBUTION	<input checked="" type="checkbox"/>
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>



Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Re-Entry		7. Unit Agreement Name
2. Name of Operator Chama Petroleum Company <input checked="" type="checkbox"/>		8. Farm or Lease Name Ivey Com.
3. Address of Operator P.O. Box 31405, Dallas, Texas 75231		9. Well No. 1
4. Location of Well UNIT LETTER <u>H</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>5</u> TOWNSHIP <u>19S</u> RANGE <u>26E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat-Penn
15. Elevation (Show whether DF, RT, GR, etc.) 3368.7' GL		12. County Eddy

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/> Activity	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

2/8/85: Checked tubing-casing annulus and vented small amount of gas to relieve pressure.  
Checked 4 1/2 x 8 5/8 annulus & found no pressure.  
2/9/85: Laid out surface production equipment arrangement and repaired temporary fencing.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Leslie A. Clements TITLE President DATE 2/11/85

Original Signed By  
Leslie A. Clements  
Supervisor District II

APPROVED BY \_\_\_\_\_ DATE FEB 28 1985

CONDITIONS OF APPROVAL, IF ANY: