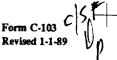
Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico



District Office		oodii oo baarii.	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO		WELL API NO.
	P.O. Box 208	311 <u>-</u>	015-21817
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexiq	EZ404:0 088	5. Indicate Type of Lease
, ,		0.0.4000	STATE FEE
DISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410	SEF	3 0 1993	6. State Oil & Gas Lease No.
	4		L-4757
SUNDBY NOTIC	CES AND REPORTS ON WE		
DO NOT USE THIS FORM FOR PRO			
	VOIR. USE "APPLICATION FOR PE		7. Lease Name or Unit Agreement Name
	101) FOR SUCH PROPOSALS.)		Howell State Com.
Type of Well: OIL GAS GAS			Trong transfer of the comment
OIL GAS WELL X	OTHER		
. Name of Operator			8. Well No.
Barbara Fasken 🗸			1
3. Address of Operator			9. Pool name or Wildcat
303 W. Wall, Suite 1900, Midland, TX 79701			Cemetery (Morrow)
Well Location			
Unit Letter : _1980	Feet From The South	Line and 660	Feet From The West Line
			IOM INC DIRE
Section 32	Township 20-S Ra	nge 25-E	NMPM Eddy County
	10. Elevation (Show whether		7/////////////////////////////////////
	3677.5'GR		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
Cha-1- A	/////	Vature of Notice D	emort or Other Date
	ppropriate Box to Indicate I		· -
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
BEORN REMEDIAL WORK	DILLO AND ADANDON	BEMEDIAL WORK	ALTERNO CASINO
RFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
MPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
JLL OR ALTER CASING	L	CASING TEST AND CE	
TUED.		OTHER:	Г
THER:		OTHER:	
2. Describe Proposed or Completed Operation	ons (Clearly state all pertinent details, an	d give pertinent dates, includ	ling estimated date of starting any proposed
work) SEE RULE 1103.	•		
TD 9900' PBTD 9740'			
	asn2_ng! 0512 17! 06	11_52'	
Morrow Perfs 9422-32', 9	7502-00 , 9512-1/ , 90°	+1-2C	
Packer @ 9203'			
Propose to:	DOD Upagat market	DON	
l. Kill well. Install			
2. RIW w/redressed pack	ker and TOSSD to ±9465	• 710/ METE	• •
	s 9502'-9652' w/2000 g		C10.
	l up and reset packer		
5. Swab back load and a	acid water. Return to	production.	
	A section from the section of the se	_1!_6	
hereby certify that the information above is true a			0.00.00
GONATURE Carl W. B.	rownm	Petroleum En	gineer <u>PATE</u> <u>9-29-93</u>
YPEORPRINT NAME Carl W. Bro	own		TELEPHONE NO. 915-687-1
This space for State Use) ORIGINA	LISIGNED BY		
MIKE WI	•		OCT 1 9 1993
SUPFRY	ISOR DISTRICT IF	D	DATE
APPROVED BY	TILL	£ ———	DAIE