Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural Re	esources Department	-	Form C-103 Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIC 2040 Pacheco St.		WELL API NO. 30-015-23049	
<u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87	505	sIndicate Type of Lea	ase
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			sState Oil & Gas Lea	STATE FEEX
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESEN (FORM C	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN ( RVOIR. USE "APPLICATION FOR PER >101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7Lease Name or Uni	it Agreement Name
Type of Well: OIL GAS WELL WELL	OTHER			
<sup>2</sup> Name of Operator Nearburg Producing Company			₃Well No. 1	
<sup>3</sup> Address of Operator 3300 N A St., Bldg 2, Suite 120, M	lidland, TX 79705		Pool name or Wildc	at Upper Penn, North
4Well Location			1 24990 2141, 4	
Unit Letter I : 1980	Feet From The South	Line and 660	Feet From The	East Line
Section 23	Township 19S R	ange 25E	NMPM	Eddy County
	₀Elevation (Show whether DF, H 3417' GR	RKB, RT, GR, etc.)		
11 Check A	ppropriate Box to Indicate Na	ture of Notice, Re	port, or Other I	Data
NOTICE OF IN	TENTION TO:	SUBS	SEQUENT RE	EPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	· · · .	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING O	PNS	PLUG AND ANBANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEME	ENT JOB	
OTHER:		OTHER: Temporarily	Abandon	×
Describe Proposed or Completed Operation work) SEE RULE 1103.	ns (Clearly state all pertinent details, and give	L pertinent dates, including es	stimated date of starting	g any proposed
Nearburg Producing Company has	retested the above referenced well	on 08/17/01. Per OCD	letter dated 8/3/0	1.
Chart attached.				123456733
Temporary Abar until R - / /	ndoned Status approved			A 2002 RECEIVED SIA 133 OCD ARTESIA 133 OCD ARTESIA 133

TITLE Regulatory Analyst

TITLE

01-29-2002

2002

TELEPHONE NO. 915/686-8235

DATE

fill her PFEB 1

until	8-17-6	23
	$\underline{0}$	

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

SIGNATURE TYPE OR PRINT NAME Kim Stewart

(This space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: