NO. OF COPIES RECEIVED							
DISTRIBUTION		•			Form C-103		
SANTA FE	+	NEW MEXICO OU CON	RECE	IVED	Supersedes O C-102 and C-		
FILE	17	NEW MEXICO OIL CON	ISERVATION COMMISSION	N	Effective 1-1-	65	
U.S.G.S.	+		ADD 1 (1004	<u> </u>		
LAND OFFICE	+-1		APR 13	3 1981	5a. Indicate Type		
OPERATOR ;	+				State X	Fee	
O. C. D.					5. State Oil & Go	s Lease No.	
SI	INDRY NOT	ICES AND PEROPES OF	ARTESIA, C		LG-2678	mmm	
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.)							
OIL GAS WELL	OTHE		en vicosacia.)		7. Unit Agreemen	t Nume	
2. Name of Operator					8. Farm or Lease Name		
COOK OIL & GAS PRODUCTION Co							
3, Address of Operator					STATE 9. Well No.		
P.O. BOX 159, ROSWELL, NEW MEXICO 88201					#4		
					10. Field and Pool, or Wildcat		
UNIT LETTER					CHITCADM		
	•	FEET FROM THE DOOTIL	LINE ANDZJIU	FEET FROM	TTTTTTT	minim	
THE EAST LINE	SECTION	2 TOWNSHIP 19-5	31-E				
		TOWNSHIP	AANGE	NMPM.			
		15. Elevation (Show whether	r DF, RT, GR, etc.)		12. County	4////////////////////////////////////	
		3609.7			EDDY		
Check Appropriate Box To Indicate Nature of Notice, Report or Otl						<u> </u>	
NOTICE	OF INTENTI	ON TO:					
			308	SEQUENT	REPORT OF:		
PERFORM REMEDIAL WORK		PLUG AND ABANDON	REMEDIAL WORK	<u></u>			
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	H		NG CASING	
PULL OR ALTER CASING		CHANGE PLANS	CASING TEST AND CEMENT J		PLUG A	NO ABANDONMENT	
			OTHER				
OTHER							
 Describe Proposed or Complet work) SEE RULE 1103. 	ed Operations (Clearly state all pertinent det	ails, and give pertinent date	s, including e	estimated date of s	tarting any proposed	
WE WOILD TIKE TO	ם מערנופט	m an eventare	OR MINE ON MINE				
WE WOULD LIKE TO	OOI DI	T AN EXTENTION	OF TIME ON THE	ABOVE	SAID WELI	ı,	
FOR APRIL 24, 19	, o i . DO	E TO THE AVAILA	RITILA OF Y KI	G.			
			,	N D D D O V A I	VALID FOR /8	20	
				DEDMIT :	EXPIRES 70	DAYS	
				OINTE22	DRILLING UN	DERWAY	
1							
B. I hereby certify that the informa	ation above is .	rife and complete to the heart -	of my knowledge a second				
11/1-5	1	and complete to the best of	i my knowiedge and belief.				
M///3/11/10	7)	11.1	CDEM's Est		_		
GNED / (MMY)		TITLE SE	CRETARY		DATE 4-3	-81	
	1						
	years.	A.			1: mn	1 / 1001	
PPROVED BY	rusel	TITLE ST	UPERVISOR. DISTRICT	r n	APK	1 4 1981	

ONDITIONS OF APPROVAL, IF ANY: