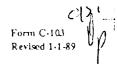
Submit 3 Copies to Appropriate
District Office

State of New Mexico Energy, Minerals and Natural Resources Department



<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

WELL API NO.

	P.O. Box		30-015-24453	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mex	rico 87504-2088	5. Indicate Type of Lease STATE FEE	X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
		SECENTE		
	S AND REPORTS ON	WELLS\"		
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOR	SALS TO DRILL OR TO DEE R. USE "APPLICATION FOI		7. Lease Name or Unit Agreement Name	
,	FOR SUCH PROPOSALS.)	UN 14 34	Walters	
I. Type of Well: OL CAS WELL WELL X	OTHER	0. C. D.		
2. Name of Operator		ARTESIA, OFFI	8. Well No.	
Matador Operating Comp 3. Address of Operator	any		1 Q. Book some on Wildow F	
415 W. Wall, Ste 1101,	Midland, TX 7970)1	9. Pool name or Wildcat East Lake Mo Gas, Four Mile Draw Atoka	rrov Gas
	Feed From The North	Line and 1980	Feet From The East	Line
Section 7	Township 19S	Range 27E	NMPMEddy Cou	nty
	10. Elevation (Show wh 3274.1 GR	ether DF, RKB, RT, GR, etc.)		
11. Check App	ropriate Box to Indic	ate Nature of Notice, R	Report, or Other Data	
NOTICE OF INTEN	_		SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMEN	1T [
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER: Show disposal		OTHER:		
12. Describe Proposed or Completed Operations (work) SEE RULE 1103.	Clearly state all persinent deta	ils, and give pertinent dates, inclu	uding estimated date of starting any proposed	
Water from 210 bbl fib Don McDaniels Trucking	erglass salt wat at Fanning Com	er tank will be di #1 SWD, Case # 873	sposed of by 38, Order # R8079.	
•				
I hereby certify that the information shows is true and to	omplete to the best of my knowledg	e and belia,		
SIGNATURE	<u></u>	me Operations M	lanager DATE June 13, 1	994
TYPE OR PRINT NAME			TELEPHIONE NO.	
(This space for State Use)				
SUPERVISOR	PROTEIN THE		JUN I S 1	364

CONDITIONS OF APPROVAL, IF ANY:

APTROVED BY -