

457  
DP

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-26037
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Anderson 10J
8. Well No. 2
9. Pool name or Wildcat Und. Cemetary Morrow

Section 10	Township 20S	Range 25E	NMPM	Eddy	County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3416.0' GR					

**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 TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	FEB 22 '89
2. Name of Operator Nearburg Producing Company	O. C. D.
3. Address of Operator P. O. Box 31405, Dallas, Texas 75231-0405	ARTESIA OFFICE

4. Well Location Unit Letter J : 1980 Feet From The East Line and 1980 Feet From The South Line
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11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Activity <input checked="" type="checkbox"/>

12. 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.

1/29/89 Ran 244 jts. 15# 5" & 2 jts. 5-1/2" 23# casing set @ 9708'. Cemented with 200 sx. Class "H".

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

SIGNATURE T. R. MacDonald TITLE Engineering Manager DATE 2/21/89  
TYPE OR PRINT NAME T. R. MacDonald TELEPHONE NO. (214) 739-1778

(This space for State Use)

Original Signed By  
Mike Williams

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAR 7 1989  
CONDITIONS OF APPROVAL, IF ANY: