Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-89

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

RECEIVED
AUG 29 '89
O. C. D.
ARTESIA, OFFICE

WELL API NO.
30-015-26148

5. Indicate Type of Lease STATE FEE

6. State Oil & Gas Lease No.
B 7717

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.)

7. Lease Name or Unit Agreement Name
PJ "A" State

1. Type of Well:
OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator
Fred Pool Drilling, Inc.

8. Well No.
17

3. Address of Operator
P.O.Box 1393, Roswell, N.M. 88201

9. Pool name or Wildcat
Und.Turkey Trk,SR-Q-G--SA

4. Well Location
Unit Letter O : 1980 Feet From The East Line and 660 Feet From The South Line

Section 2 Township 19S Range 29E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3360' Gr

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: perforations and acidize	

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.

Perforated from 2257 to 2278. Acidized well with 1000 gallons 15% HCL. Frac well with 30,000 gallons gelled water; 33,000# 20/40 sand, 32,000# 12/20 sand.

Put well on pump.

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

SIGNATURE Penta Pool TITLE Vice President DATE 8-21-89

TYPE OR PRINT NAME Penta Pool TELEPHONE NO. 623-8202

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE DATE AUG 29 1989

CONDITIONS OF APPROVAL, IF ANY: