

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

dsf
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.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-1652
7. Lease Name or Unit Agreement Name H&S State
8. Well No. 1
9. Pool name or Wildcat Millman - Grayburg
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3498.6 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
(FORM C-101) FOR SUCH PROPOSALS.)

RECEIVED

DEC 27 '90

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Harvard Petroleum Corporation
3. Address of Operator P.O. Box 936, Roswell, NM 88202	4. Well Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 24 Township 19 South Range 27 East NMPM County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3498.6 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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: <input 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.

11-30-90: MIRU Pulling unit. Bleed well down. Rig up swabbing equipment. Swab 10 bbls. water with slight show of oil. Shut well in for pressure build-up.

12-1-90: Check pressure. Swab well down. Shut well in and Rig down. Prep to recomplete.

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

SIGNATURE Jeff Harvard TITLE Vice-President DATE 12/20/90

TYPE OR PRINT NAME Jeff Harvard TELEPHONE NO. (505) 623-1581

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT 10

JAN 28 1991

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: