Submit 3 Copies to Appropriate District Office	-	State of New Me s and Natural Re	exico esources Department	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		P.O. Box 208		WELL API NO. 30-015-26819
P.O. Drawer DD, Artesia, NM 88210	Santa Pe	, New Mexico	8/DEC-9 1991	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		,	O. C. D. ARTESIA OFFICE	6. State Oil & Gas Lease No.
SUNDRY NOTI ( DO NOT USE THIS FORM FOR PRO DIFFERENT RESER (FORM C	POSALS TO DRILL	OR TO DEEPEN	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: Off. GAS WELL X WELL		OTHER		Mayer 24
2. Name of Operator				8. Well No.
Nearburg Producing Com	ipany /			9. Pool name or Wildcat
3. Address of Operator	T 7	<b>5300 3005</b>		Dagger Draw Upper Pennsylvanian-South
P. O. Box 823085, Dall	as, lexas /	5382-3085		Dagger braw opper remisy (valitair south)
	BO Feet From The	north	Line and6	Feet From The West Line
Section 24	TOWNERTO		inge 24E	NMPM Eddy County
	7/////	tion (Show whether 3,609.6' GF	DF, RKB, RT, GR, etc.) \	
11. Check	Appropriate Bo	x to Indicate	Nature of Notice,	Report, or Other Data
NOTICE OF INTENTION TO:				BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND A	BANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLA	ANS	COMMENCE DRILLI	NG OPNS. DPLUG AND ABANDONMENT
PULL OR ALTER CASING			CASING TEST AND	CEMENT JOB
OTHER:			OTHER: Acti	vity X
12. Describe Proposed or Completed Opera	tions (Clearly state all	l persinent details, a	nd give pertinent dates, in	cluding estimated date of starting any proposed

12. Describe Proposed or	Completed Operations (Cla	arty state all pertinent details,	, and give pertinent dales, inclu	ding estimated date of st	arting any proposed
work) SEE RULE 11	03.				
		. /0 7/0U +b	" 1 DDD		

11/25/91 Released pkr, P00H w/2-7/8" tbg and RBP.
11/26/91 GIH w/DNC 1750 submersible pump and motor (114'), and 249 jts 2-7/8" J-55 tbg.
Tbg set @ 7,717'. Pump shroud set @ 7,831'. Left well pumping.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE	Machelle Byen		DATE12/3/91		
TYPE OR PRINT NAME	Machelle Byrum		тецерноме но.214/739-1778		
•	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF	тп.е	JAN 2 2 1992		