Submit 3 Copies to Appropriate District Office

State of New Mexico rals and Natural Resources Department Energy, 1

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088

30)-015-28430	
	Indiana Time of Lesse	

6. State Oil & Gas Lease No.

WELL API NO.

P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

FEE KX STATE

1000 Rio Brazos Rd., Aztec, NM 87410

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: B&B GAS WELL OTHER WELL 8. Well No. 2. Name of Operator Nearburg Producing Company 9. Pool name or Wildcat 3. Address of Operator Dagger Draw, Upper Penn, North P. O. Box 823085, Dallas, TX 75382-3085

Well Location

11.

OTHER:

600' Feet From The Unit Letter .

North 19S

25E

Line and 1,980' Feet From The

Line

Township

Range 10. Elevation (Show whether DF, RKB, RT, GR, etc.) **NMPM** Eddy County

3,471' GR

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO: PLUG AND ABANDON PERFORM REMEDIAL WORK

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB Liner & cement OTHER:

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.

Drilled to 8,200'. LDDP and DC's. RU and ran 212 jts. 7" 23# and 26#, N80, K55, STC, LTC and BTC casing. Wash 30' to bottom. C&C hole. Cmt. csg. w/1,250 sx cmt. and additives in two stages. Circ. 49 sx cmt. tp surface & 124 sx on 2nd stage. ND BOPE and clean mud pits. Release pits.

RECEIVE

FEB 2 1 199Z

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

<u>District II supervisor</u>

SIGNATURE Kim Stewart mr Secretary

(915) 686-8235

(This space for State Use)

TYPE OR PRINT NAME

ORIGINAL SIGNED BY TIM W. GUM

CONDITIONS OF APPROVAL, IF ANY: