Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, ...nerals and Natural Resources Department

Form C	-103
Revised	1-1-89

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

OIL CONSERVATION DIVISION P.O. Box 2088

WELL API NO.

-DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			30-015-28599		
		0/304-2088	5. Indicate Type of Lease		
DISTRICT III					
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.		
SUNDRY NOTICE	ES AND REPORTS ON WEL	LS			
(DO NOT USE THIS FORM FOR PROP		OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name		
	1) FOR SUCH PROPOSALS.)	MMI I			
1. Type of Well: Off. GAS			Osage Boyd 15		
MET X MET	OTHER	<u></u>			
2. Name of Operator	√		8. Well No.		
Nearburg Producing 3. Address of Operator	Company		# 2 9. Pool name or Wildcat		
P. O. Box 823085, I	allas. Texas 753	82-3085	Dagger Draw: Upper Penn, North		
Unit Letter K: 1,65	OFeet From The South	Line and 1,980	Feet From The West Line		
Section 15	Township 19S Ra	nge 25E	NMPM Eddy County		
Section 15	Township 195 Ra 10. Elevation (Show whether)		NMPM Eddy County		
	3,457 GR				
11. Check Ap	propriate Box to Indicate I	Nature of Notice, R	eport, or Other Data		
NOTICE OF INTE	NTION TO:	SUB	SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS PLUG AND ABANDONMENT		
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB		
OTHER:		OTHER: Product	ion Casing and Cement X		
12. Describe Proposed or Completed Operation	s (Clearly state all pertinent details an	d vive pertinent dates, inclu	ding estimated date of starting any proposed		
work) SEE RULE 1103.	s (Citally State an perimera access, on	4.10 per 10-2/11			
Drilled to 8,150'.	C&C mud. POH and	LDDP and DC's	s. RU and ran 241 jts		
7" 23# and 26# S-95,	K-55 and N-80 STC	and LTC csg.	. Set casing at 8,150'.		
C&C mud. Cement casing using 1,320 sacks cement plus additives in two stages					
Circulated cement to	surface on both s	tages.			
		3	received		
		Year of	la l		
	_		MAY 3 + 1996		
I hereby certify that the information above is true and	complete to the heat of our branded ===================================	helief	MM1 0 1 1330		
i nereby certify that the important above is true and			Ding (Prad) part 7-28-96		
SIGNATURE	imily	Mgr of Dri			
TYPEOR PRINT NAME E SCOTT Kimb	prough		DIST: 2 telephone no. $505/397-4$		

ORIGINAL SIGNED BY TIM W. GUM

DISTRICT II SUPERVISOR

- DATE -- TITLE -

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CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-