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Submit 3 Copies To Appropriate Dist		ate of New Mexic		b	()	Form C-1
District I 1625 N. French Dr., Hobbs, NM 8724		erals and Natural	Resources	WELL API NO.	V Revise	ed March 25, 19
District II 811 South First, Artesia, NM 87210		SERVATION I	DIVISION	1	15-31012	
District III	20	040 South Pached	15 16 17 -	5. Indicate Type	_	_
1000 Rio Brazos Rd., Aztec, NM 874 District IV	Sa Sa	SERVATION I	18 19 30	STATE	X FEE	
2040 South Pacheco, Santa Fe, NM 8	7505	ZN	1 3	6. State Oil & G B-9739-22		
SUNDRY N (DO NOT USE THIS FORM FOR P DIFFERENT RESERVOIR. USE "A PROPOSALS.) 1. Type of Well: Oil Well Gas, Well		OR IS ON-WELLS OR TO DEEPEN OR I	1236	7. Lease Name of		ment Name:
2. Name of Operator √	COMP AND	1	18086780	8. Well No.		<u> </u>
BELLWETHER EXPLORATION C 3. Address of Operator	OMPANY			9. Pool name or	Wildest	
1331 LAMAR, SUITE 1455, 4. Well Location	HOUSTON, TEXAS 770	10-3039		TURKEY TRACK;		
Unit Letter M	: 990' feet fro	om the SOUTH	line and	990' feet fr	om the k	VESTline
Section 2	Townsl	hip 19S Ran	ge 29E	NMP M	County	EDDY
	10. Elevation (Show whether DR, 3368	RKB, RT, GR, etc	:.)	The X of	
11. Che	ck Appropriate Box		ture of Notice	Report or Othe	r Data	. A tee Massing lander
	NTENTION TO:			SEQUENT RE		: .
PERFORM REMEDIAL WORK	☐ PLUG AND ABA	ANDON 🔲 RE	MEDIAL WORK			IG CASING
TEMPORARILY ABANDON	☐ CHANGE PLAN	s 🗆 co	MMENCE DRILLII	NG OPNS.		
PULL OR ALTER CASING	MULTIPLE COMPLETION		SING TEST AND MENT JOB	x	ABANDO]	INIVICIAI
OTHER:		□ от	HER:			
 Describe Proposed or Composed of starting any proposed wo or recompilation. 	pleted Operations (Clerk). SEE RULE 1103.	arly state all pertin For Multiple Con	ent details, and giv apletions: Attach v	ve pertinent dates, wellbore diagram (including esti of proposed co	mated date ompletion
Spudded Well 6/3/00						
6/4/00 - 11-3/4" 42# Tested to 75 no cement to surface.	0 psi - 30 min. W	OC 23 hrs. Circ	. cmt. TOC at 5	0'. Attempted t	5:65, 150 s to top out	x. cl C. w/ 50 sx.,
6/11/00 - 8-5/8" 32# K Tested to 12	-55 casing set at 3 50 psi - 30 min. W	3000'. Cemente WOC 20 hrs. Cir	d w/ 1200 sx 35 c. out 325 sx.	6/65 cement. cmt. to surface	e. TOC @ su	rface.
7/5/00 - TD'd well @ :	11,650'.					
I hereby certify that the information ab	pove is true and complete	to the best of my kn	owledge and belief.			
SIGNATURE JUNE 1	l. Hall	TITLE RE	GULATORY COORDI	NATOR	DATE <u>07</u>	/10/00
Type or print name NANCY K. GAT				Telepho	one No. 713	3-753-1492
(This space for State use)	ORIGINAL SIGNE	dby tim w. Gi	M	<u> </u>	ATE JUL	
APPROVED BY Conditions of approval if any:	134			D.	ATE.	