

BLM	
Land Office	
H of M	
Operator	

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

DEC 4 '89 Form C-103
Revised 1-1-89

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 APT NO. O. C. D. <u>30 - ARTESIA OFFICE</u>
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. <u>L-1648</u>
7. Lease Name or Unit Agreement Name <u>MYRTLE MYRA *</u>
8. Well No. <u>2</u>
9. Pool name or Wildcat <u>WILDCAT DELAWARE</u>

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)

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. Name of Operator <u>RAY WESTALL</u>
3. Address of Operator <u>P.O. Box 4, Coca Hills NM 88255</u>
4. Well Location Unit Letter <u>J</u> : <u>1830</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>9</u> Township <u>21 S</u> Range <u>27 E</u> NMPM <u>Eddy</u> County <u>Eddy</u> 10. Elevation (Show whether DP, RAB, RT, GR, etc.) <u>3229 Gr. 3249 KB</u>

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐
PULL OR ALTER CASING ☐	OTHER: <u>plug back to Delaware</u> ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	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.

NOTE NAME Change from C.P. Comm #1 to MYRTLE MYRA #2

Propose to Set C.I.B.P. at 5080 and dump 35' cement on top
Perf Delaware and Stimulate as Necessary for Production

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

SIGNATURE

[Signature]

TITLE

Geologist

DATE

12/4/89

TYPE OR PRINT NAME

RANDALL ALPHEUS

TELEPHONE NO.

677-2370

(This space for State Use)

ORIGINAL FILED IN

APPROVED BY

[Signature]

TITLE

DATE

DEC 13 1989

CONDITIONS OF APPROVAL, IF ANY: