Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form (C-103
Revise	d 1-1-8

Energy, Minerals and Naniral Resources Departm

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

P.O. Box 2088 RSCEVI anta Fe, New Mexico 87504-2088

5. Indicate Type of Lease	
30-015-21859	 _
WELL API NO.	

DISTRICT II	Santa Fe, New Mexico 8	7504-2088				
). Drawer DD, Anesia, NM 88210		5. Indicate Type of Lease STATE FEE X				
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		AUG 27 '90	6. State Oil & Gas I	ease No.		
(DO NOT LISE THIS FORM FOR PROPOS DIFFERENT RESERVOI	S AND REPORTS ON WELL SALS TO DRILL OR TO DEEPEN O R. USE "APPLICATION FOR PER) FOR SUCH PROPOSALS.)	DR PANESSACIONIOCA	7. Lease Name or U	Dut Agreement Name		
1. Type of Well: OIL OAS			7 0			
WELL WELL A	OTHER		Jones Com 8. Well No.			
Allwood Petroleum, Inc.	/		1 1			
3. Address of Operator	-		9. Pool name or Wi	ildcat		
P.O. Box 378111, Denver, C	0 80237		Revelation	Morrow		
4. Well Location Unit Letter I : 1980	Feet From The South	Line and660	Feat From	The <u>East</u> Line		
Section 9	Township 22S Ran	nge 25E	NMPM Eddy	County		
	10. Elevation (Show whether I 3,520 'GL, 3,5	DF, RKB, RT, GR, etc.)				
11. Check App	propriate Box to Indicate N	Nature of Notice, R	leport, or Other	Data		
NOTICE OF INTER	NTION TO:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	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				
OTHER:		OTHER: Re-per	forate	<u>X</u>		
12. Describe Proposed or Completed Operations work) SEE RULE 1103. Hallwood Petroleum pe						
	Tropaga addressing .	norrow pay in t	the solies com	WI as IUIIOWS.		
July 11, 1990	/-14-1-14 /1-0//11		0			
1. RUWL, RIH W/	slick line $w/1-3/4$ "	cutter. Tag bo	ottom @ 10,52	5'.		
July 12, 1990						
2. RIH w/1-11/1	6" hollow carrier gu	n. Perf 10,140	0-152', 10,18	2-184',		
10,190-204' 3. POOH w/WL.	W/4 JSFf. Place on production.					
- · · · · · · · · · · · · · · · · · · ·	rade on production.					
I hereby certify that the information above is true an	d complete to the best of my knowledge an	d belief.				
SIGNATURE SILLY S.	Beckerdson T	Sr. Ops. Er	ng. Tech.	DATE <u>8/21/90</u>		
TYPEOR PRINT NAME Holly S. Ric			350-6322	TELEPHONE NO.		
MIKE W	AL SIGNED BY			AUG 3 1 1990		
APPROVED BY SUPER	an DISTRICT II	m.e	 	DATE		