## Submit 3 Copies to Appropriate District Office

## State of New Mexico Energ,, Minerals and Natural Resources Department

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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., Aziec, NM 87410

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-015-21938

5. Indicate Type of Lease STATE

FEE X

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON W	:LLS			
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP DIFFERENT RESERVOIR. USE "APPLICATION FOR (FORM C-101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name			
1. Type of Well: ORL GAS WELL WELL X OTHER	Mesa Fuerta			
2. Name of Operator	8. Well No.			
Kaiser-Francis Oil Company	1.			
3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468	9. Pool name or Wildcat Happy Valley (Strawn)			
4. Well Location				
Unit Letter J : 1833 Feet From The South	Line and 1980 Feet From The East Line			
Section 33 Township 21S	Range 26E NMPM Eddy County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3238 GR				
11. Check Appropriate Box to Indicate	Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON	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:			

- work) SEE RULE 1103.
- Set CIBP @ 9800' w/35' cmt on top. 1.
- TIH W/tbg. Circ hole w/9.5# SW gel. 2.
- Set 25 sx cmt plug @ 6800'-6700'.
- Cut off & pull  $5\frac{1}{2}$ " casing (estimated 4000' casing recovery). Set 45 sx cmt plug 50' in & 50' out of casing stub.
- Set 65 sx cmt plug @ 2800'-2700'. 6.

CONDITIONS OF APPROVAL, MANY:

- Set 20 sx cmt plug @ 30' to surface. 7.
- Cut off wellhead & install DH marker.

Plugging operations to start approximately 8/1/01.

I hereby certify that the information above is true and complete to the best of my in	nowledge and belief.  Technical Coordinator	DATE 6/25/01
TYPE OR PRINT NAME Charlotte Van Valkenburg	918-491-4314	TELEPHONE NO.
(This space for State Use)  APPROVED BY  APPROVED BY	JiELD REP 1	7-23-01
APPROVED BY		DATE