

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

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

P.O. Box 2088  
Santa Fe, New Mexico 87504

AUG 09 1991

O. C. D.

ARTESIA, OFFICE

|   |
|---|
| WELL API NO.<br>30-015-90621  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>K-4902  |
| 7. Lease Name or Unit Agreement Name<br>Catclaw Draw  |
| 8. Well No.<br>16   |
| 9. Pool name or Wildcat<br>Catclaw Draw Morrow  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)  |

|  |  |
|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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:<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER   |  |
| 2. Name of Operator<br>HALLWOOD PETROLEUM, INC.  |  |
| 3. Address of Operator<br>P. O. Box 378111, Denver, Colorado 80237   |  |
| 4. Well Location<br>Unit Letter <u>E</u> : <u>990</u> Feet From The <u>West</u> Line and <u>2310</u> Feet From The <u>North</u> Line<br>Section <u>13</u> Township <u>21S</u> Range <u>25E</u> NMPM <u>Eddy</u> County |  |

|   |   |
|---|---|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data                   |   |
| NOTICE OF INTENTION TO:   | SUBSEQUENT REPORT OF:                               |
| PERFORM REMEDIAL WORK <input type="checkbox"/>  | REMEDIAL WORK <input type="checkbox"/>              |
| TEMPORARILY ABANDON <input type="checkbox"/>  | ALTERING CASING <input type="checkbox"/>            |
| PULL OR ALTER CASING <input type="checkbox"/>   | COMMENCE DRILLING OPNS. <input type="checkbox"/>    |
| OTHER: Temp. abandon Morrow "B" zone and recomplete to Morrow "A" zone <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/>       |
|   | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
|   | OTHER: <input type="checkbox"/>                     |

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.

See attached sheet

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

SIGNATURE Eva Kardas TITLE Production Analyst DATE 8/7/1991

TYPE OR PRINT NAME Eva Kardas TELEPHONE NO. (303)850-6282

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

AUG 14 1991