	j.				
Submit 3 Copies to Appropriate District Office	State of New M Energy, Minerals and Natural		Form C-103 Revised 1-1-89		
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATI P.O. Box 2		<b>Well API NO.</b> 30-015-24770		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	<b>87504-2088</b> - C 1935	5. Indicate Type of Lease STATE XX FEE		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	OIL CON. DIV.		6. State Oil & Gas Lease No. K-6527		
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.)			7. Lease Name or Unit Agreement Name		
1. Type of Well: On. WELL WELL X	OTHER		Eddy "FV" State		
2. Name of Operator Premier Oil & Gas, Inc	<u> </u>		8. Well No.		
3. Address of Operator P.O. Box 1246, Artesia		<u></u>	9. Pool name or Wildcat Avalon Delaware		
4. Well Location Unit LetterP:660	Feet From The South	Line and330	Feet From TheEast Line		
Section 25			NMPM Eddy County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3302.5 GR					
II. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data   NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
		REMEDIAL WORK			
	CHANGE PLANS				
PULL OR ALTER CASING		CASING TEST AND CE			
OTHER: Remain in Active Status X 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.

Premier Oil & Gas requests that this well continue its Active Status. Remedial work which began in September, 1995, was disrupted because of a dispute regarding the statutory unitization of this lease, NMOCD Cases No. 11297 and No. 11298. There will be a hearing in District Court to settle this dispute, currently scheduled for December 26, 1996. At that time, this well will either be a part of Exxon's Avalon Delaware Unit or we will remain as operator. Therefore, we request that this well remain a Delaware producing well.

I hereby certify that the information above is true and complete to the best of my knowledg SIGNATURE	e and belief. President	DATE 11/05/96
TYTE OR PRINT NAME ROSalie Jones		(505) TELEPHONE NO. 748-2093
(This space for State Use)		
ORIGINAL SIGNED BY TIM W. GUM ATTROVED BY DISTRICT II SUPERVISOR	- TITLE	DATE NOV 12 1996