. <u>.</u>						
 Submit 3 Copies to Appropriate Energ, District Office			State of New Mexico ,, Minerals and Natural Resources Department			Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		OIL CONSERVATION DEVISION P.O. Box 2088			WELL API NO.	
P.O. Drawer DD,	Santa Fe, New	nta Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE FEE		
DISTRICT III 1000 Rio Brazos	Rd., Aziec, NM 87410				6. State Oil & Gas Les	ase No.
SUNDRY NOTICES AND REPORTS ON WELLSTESIA, OFFICE (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: OIL WELL	: Well XX	OTHER			Shafer Fe	ed. Comm.
2. Name of Oper			· · · ·		8. Well No.	
Steve S 3. Address of O		· · · · · · · · · · · · · · · · · · ·			#1. 9. Pooi name or Wildo	
P.O. Bo	•	and, Texas 79704	1			asin Cisco
4. Well Location				····		
Unit Let	tter <u> </u>	Feet From The		Line and	Feet From The	Line
Section	35	Township 21S	R	inge 24E	NMPM Eddy	County
///////////////////////////////////////		10. Elevation (Sh	ow whether	DF, RKB, RT, GR, etc.)		
11.		Appropriate Box to I ENTION TO:	ndicate.		eport, or Other Da	
PERFORM REME		PLUG AND ABANDO	м 🗌	REMEDIAL WORK		
TEMPORARILY A	ABANDON X	CHANGE PLANS			OPNS. 🗌 PLU	
PULL OR ALTER CASING						
OTHER:				OTHER:		
12. Describe Prope work) SEE RI		ions (Cleart) state all pertinen	t details, ar	nd give pertinent dates, includ	ling estimated date of star	ting any proposed
6-22-89	Drilled to 367 400 sxs Premiu	" Circulated ho m Plus 2% CACL2 p.m. plug held	2, 1/4#	per sx Flocele	Circulate 94	sxs cement
6-27-89	Drilled to 246 ST&C, 22 jts 3 Light with 2% CACL2. Circul	9' Circulate ho 6# J-55 ST&C 9 5 CACL2, 1/2# Floc ated 240 sxs cen on location. T	ole Ra 5/8" ca cele, t ment to	n 15 jts 36# J- sing cemented w ail in with 200 surface Plug	55 LT&C, 28 jt ith 800 sxs F sxs Premium E down @ 2:00 a.	as 32.30# J-55 Halliburton Plus with 2% m. MDT, NMOCD
I hereby certify that SKINATURE	AE A	for complete to the best of my kn	1111			DATE June 28, 1989 TELEPHONE NO.915-685-1761
(This space for State	: Use)					
APPROVED BY			m	£	I	DATE
CONDITIONS OF APP	ROVAL, IF ANY:					