Submit 3 Copies to Appropriate District Office	State of New M Energy, rals and Natural F	lexico Resources Department	Form C-103 Revised 1-1-89			
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATI R.O. Box 20 Sants FE, NEW Mexico)88	WELL API NO. 30 - 015 - 26433 5. Indicate Type of Lease			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	JUL 31 '90		STATE XX FEE 6. State Oil & Gas Lease No. LG-4525			
DIFFERENT RESE (FORM (ICES AND REPORTS ON WE IOPOSALS TO DATE OR TO DEEPE RVOIR. USE ARESIGN ACTIVE OR PL C-101) FOR SUCH PROPOSALS.)	ELLS N OR PLUG BACK TO A ERMIT	7. Lease Name or Unit Agreement Name			
1. Type of Well: OIL GAS WELL X WELL 2. Name of Operator	OTHER		Flathead State			
Siete Oil and Gas	8. Well No. 1					
3. Address of Operator P.O. Box 2523	Roswell, NM	88202-2523	9. Pool name or Wildcat Parkway Delaware			
4. Well Location Unit LetterB :3.	30 Feet From The North	Line and 16	50 Feet From The East Line			
Section 2	Township 20S	ange 29E	NMPM Eddy County			
	10. Elevation (Show whether		NMPM Lady County			
11. Check	Appropriate Box to Indicate	Nature of Notice, R	eport, or Other Data			
NOTICE OF IN	FENTION TO:		SEQUENT REPORT OF:			
		REMEDIAL WORK				
	CHANGE PLANS					
PULL OR ALTER CASING		CASING TEST AND CE				
OTHER:	·	OTHER:				
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	uions (Clearly state all pertinent details, a	nd give pertinent dates, inclu	ding estimated date of starting any proposed			

Siete Oil and Gas Corporation respectfully requests to alter the proposed casing program on the Application for Permit to Drill as follows:

HOLE SIZE	CASING SIZE	WEIGHT PER FOOT	DEPTH SET	SXS OF CMT	EST. TOP
26"	20"	94#	350'	350	Surface
17½"	13`3/8"	54.5#	900'	500	Surface
12¼"	8 5/8"	24# & 32#	3200'	1200	Surface
7 7/8"	5½"	15.5#	4990'	700	N/A

I hereby certify that the inform SKONATURE	L A		A		Drilling/Production Tech.	DATE	1/21/90
TYPE OR PRINT NAME	J		<u> </u>				IONE NO.
(This space for State Use)	ORIGINA MIKE WI	L SIGNED BY	•				
APPROVED BY	SUPERVI	SOR, DISTRIC	F-18	mle —		- DATE -	JUL 3 0 1990
CONDITIONS OF APPROVAL, IF	ANY.	* · • <u>*</u> * • • • • •					

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