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## State of New Mexico

Form	C	-1	0	3
Revis	cd	1	٠į	-8

---- DATE --

to Appropriate District Office	Energy, N	Energy, Minerals and Natural Resources Department			Revised 1-1-89		
DISTEICT J P.O. Box 1980, Hobbs, NM 882	OIL C	ONSERVATI	WELL API NO.				
DISTRICT_II	Sar	P.O. Box 20 Ita Fe, New Mëxik					
P.O. Diawer DD, Arteria, NM 8	8210		_	5. Indicate Type of Lear	STATE X FEE		
DISTRICEIII 1000 Rio Biazok Rd., Aziec, NM	87410	AUG .	1 9 1992	6. State Oil & Gas Leas			
		0.	C. D.	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
( DO NOT USE THIS FORM I DIFFERENT	FOR PROPOSALS TO	APPLICATION FOR PI	N OR PLUG BACK TO A	7. Lease Name or Unit /	(greenient Name		
1. Type of Well: Oil. Q. WELL. W	ar X	איווודס		A. E. 36	State		
2. Name of Operator				8. Well No.			
Collins & Ware,  3. Address of Operator	Inc.			1			
303 W. Wall, Su	rite 2200, Mic	land, Texas	79701	9. Pool name or Wildcat Avalon, E.			
4. Well Location							
Unit Letter E :	2180 Feet From	The North	Line and 66	Feet From The	West Line		
Section 36	Township	205 R	ange 28 E	4MPM	Eddy County		
		Elevation (Show whether	DF, RKB, RI, GR, etc.)	V///			
XIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		3207.6 G.L.	N. CN. C.				
	FINTENTION		Nature of Notice, Re	eport, or Other Data SEQUENT REPC			
PERFORM REMEDIAL WORK	PLUG A	MODINABA DV	REMEDIAL WORK	ALTE	RING CASING		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT						
PULL OR ALTER CASING		ر ۱۰۵۰۰۰					
	CASING TEST AND CEMENT JOB						
OTHER: DEE 150	= 2000		OTHER:				
<ol> <li>Describe Proposed or Complete work) SEE RULE 1103.</li> </ol>	d Operations (Clearly sta	te all persinent details, an	nd give pertinent dates, includi	ng estimated date of starting	any proposed		
				TD (18 # )	7		
_			523' to 11,632' K		d .		
CO	omplete 11,483	3' to 11,490' I	KB (Morrow) - s	tart 8/18/92			
Pull completion	assembly from h	ole.					
Run and set a C	IBP @ appx. 11,	600' KB; dump	15-35 feet of cemen	t on top with a			
WL dum	p bailer.						
	ind test 11,483' t	o 11.490' KB.					
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	·, · · ·	<b>,</b>					
I hereby certify that the information above	e is true and complete to the	best of my knowledge and b	edid,				
( Stillien	FOO 30	and	 Consulting Eng	ineer	8/18/92		
SIGNATURE XUNIUS		TITL	E	DAT			
TYTE ON FRUIT NAME				TELL	TIONE NO.		
	<mark>RIGINAL SIGNE</mark> I IKE WILLIAMS	BY			Office of short		
	UPERVISOR, DIS	TRICT IF	1	DATE	SEP 9 1992		