Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department



District Office					
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION			WELL API NO.	<u>u</u> -	
P.O. Box 2088			30-015-27751		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			5. Indicate Type of	Lease STATE X	FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas		122
SUNDRY NOTIC	ES AND REPORTS ON WEL	10			
(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 "EV" State		
1. Type of Well: OIL					
2. Name of Operator			8. Well No.		
Collins & Ware, Inc. (4874) 3. Address of Operator			3		
508 W. Wall, Suite 1200, Midland, Texas 79701			9. Pool name or Wildcat (29665) Happy Valley (Delaware)		
4. Well Location	, midiand, Texas /9/0	11	нарру v	alley (Delaw	vare)
Unit Letter A : 330	Feet From TheEast	Line and80	O Feet From	The North	Line
Section 32	Township 22S Ra	nge 26E	nmpm Eddy	,	County
	10. Elevation (Show whether a 3300 GR	DF, RKB, RT, GR, etc.)			
11. Check A	ppropriate Box to Indicate N	Nature of Notice, R	eport, or Other	Data	
NOTICE OF INTE		·	SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	i
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING	SING CASING TEST AND CEMENT JOB				
OTHER: Drilling permit extension X OTHER:					
12. Describe Proposed or Completed Operatio work) SEE RULE 1103.	us (Clearly state all pertinent details, an	d give persinens dates, inclu	ding estimated date of s	starting any proposed	
Collins & Ware, Inc. rewell. The current perm	spectfully requests and it expires on 1/29/95	n extension of	the permit to	o drill the	above
		~ ·	Ω Λ		
		DEC 122	57 OVAL 2006 Migginson 1503 Baling	1/21/75	<u>.</u>
	0				
I hereby certify that the information above is true an	d complete to the best of my knowledge and t	oclief.			
SIGNATURE / Amu	Junell m	Production (Clerk	DATE12/8	/94
TYPE OR PRINT NAME Dianne S	umrall	(915) 687	'-3435	TELEPHONE NO.	
(This space for State Use)				Drn 4	

SUPERVISOR, DISTRICT IL

DEC 1 9 1994

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY ---