Submit 3 copies to Appropriate

State of New Mexico Energy, Mineral: d Natural Resources Department

TOTAL OF E	UJ
Revised	1-1-89

District Office			
OIL CONSERVATION DIVISION		WELL API NO. 30-015 -81832 3 19 0 8	
PO Box 1980, Hobbs, NM 88240	P. O. Bo	x 2088 1exico 87504-2088	5. Indicate Type of Lease
DISTRICT II	Santa Fe, New IV	16x100 87304-2000	STATE FEE X
PO Drawer DD, Artesia, NM 88210	ı		6. State Oil & Gas Lease No.
DISTRICT III			
1000 Rio Brazos Rd., Aztec, NM 8	7410	CALMELLS	
SUNDRY	NOTICES AND REPORTS	DEEDEN OF BLUG BACK TO A	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM	M FOR PROPOSALS TO DRILL OR TO I	FOR PERMIT"	
DIFFERE	(FORM C-101) FOR SUCH PROPOSA	LS.)	CARSON CITY
1. Type of Well:	CAC		
OIL WELL X	GAS WELL OTHER		
2. Name of Operator	- Land		8. Well No.
MYCO INDUSTRIES INC	·		1-Y 9. Pool name or Wildcat
3. Address of Operator	NM 88211-0840 (505)746-0246	6	UND. CARLSBAD MORROW, EAST
P.O. BOX 840, ARTESIA 4. Well Location	, NIVI 88211-0040 (300)1 70 02 1		FACT Line
Unit Letter G	1020	075	eet From The EAST Line County EDDY
Section 25	(E/2) Township 21S	Range 27E NMPM w whether DF,RKB,RT,GR,etc.)	
	//////////////////////////////////////	.4' GL	
11.	Check Apropriate Box to Indic	cate Nature of Notice, Report, o	or Other Data
NOTICE	OF INTENTION TO:		JENT REPORT OF : ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERNIO SAGING
TEARDORADU V ARANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG & ABANDONMENT
TEMPORARILY ABANDON			s [X]
PULL OR ALTER CASING		CASING TEST AND CEMENT JOE	
OTHER:		OTHER:	1
			a satispated date of starting any proposed
work) SEE RULE 1103.	npleted Operations (Clearly state all pertiner		
THIS WELL REPLACES TH	HE CARSON CITY #1. 1500' FNL & 1650)' FEL. (UNIT G) S25-T21S-R27E THAT ' :	WAS D/A @ 1396' TD ON 7/3/01.
7/7/01: SPUD W/17-1/2	" HOLE - NOTIFIED ARTESIA OCD.		
<u>7/8/01</u> : TD @ 495' RUN PLUG DOWN	11-JTS 13-3/8", H-40, 48# & CMT. \ 10:20 A.M. WOC 18-HRS. (CIRC. 1	W/ 225-SXS. (35:65"6) "C" + 2% Ca6 142-SXS.)	Cl2 + 1/4 C.F. + 200 "C" + 2% CaCL2
			1
			Och Much
			ARTESTA
I hereby certify that the in	formation above is true and complete to the	e best of my knowledge and belief.	
SIGNATURE (INI MUMUY PELS TITLE	OPER-ENGR MGR.	DATE 7/11/01
TYPE OR PRINT NAME	A.N. MUNCY/	TEI	LEPHONE NO. (505) 746-0246
(This space for State Use	ORIGINAL SIGNED BY		
APPROVED BY CONDITIONS OF APPROV		E	DATE TO