

*clp*  
*[Signature]*

Submit 3 copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

# OIL CONSERVATION DIVISION

P. O. Box 2088  
Santa Fe, New Mexico 87504-2088

**DISTRICT I**  
PO Box 1980, Hobbs, NM 88240

**DISTRICT II**  
PO Drawer DD, Artesia, NM 88210

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-015-32305	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name  AUGUSTA 24 FEE	
8. Well No. #1	
9. Pool name or Wildcat UND. CARLSBAD MORROW, EAST	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator MYCO INDUSTRIES, INC. ✓	
3. Address of Operator P.O. BOX 840 ARTESIA, NM 88211-0840 (505)748-4288	
4. Well Location Unit Letter A : 660' Feet From The NORTH Line and 660' Feet From The EAST Line Section 24 Township 21S Range 27E NMPM EDDY County	
10. Elevation (show whether DF, RKB, RT, GR, etc.) 3149'	

## Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

11. NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF :	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: CBL 7" <input checked="" type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

8/9/02: RAN CSG. BOND LOG ON 7" SET @ 11,480' KB. TOP CMT. APPROXIMATELY 2100' (APPROX 290' INSIDE 7" - 9-5/8" ANULUS

\* CBL ATTACHED

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *[Signature]* TITLE ENGINEERING TECHNICIAN DATE 8/12/02  
TYPE OR PRINT NAME Isabel Lopez TELEPHONE NO. (505)748-4288

(This space for State Use)  
APPROVED BY **ORIGINAL SIGNED BY TIM W. GUM**  
**DISTRICT II SUPERVISOR** TITLE DATE **AUG 19 2002**

CONDITIONS OF APPROVAL, IF ANY: