Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

State of New Mexico
gy, Minerals and Natural Resources Departm

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

Form C-103
Revised 1-1-89

WELL API NO.
30-015-20868

5. Indicate Type of Lease STATE [x] FEE [ ]

6. State Oil & Gas Lease No.
L-428

RECEIVED
OCT 25 1996
OIL CON. DIV.
DIST. 2

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.)

7. Lease Name or Unit Agreement Name
State QQ Com

1. Type of Well:
OIL WELL [ ] GAS WELL [x] OTHER

2. Name of Operator
Vista Resources of Texas, Inc.

8. Well No.
1

3. Address of Operator
P.O. Box 11307 Midland, Texas 79702-8307

9. Pool name or Wildcat
Carlsbad S.

4. Well Location
Unit Letter C : 660 Feet From The north Line and 1980 Feet From The west Lin

Section 17 Township 23S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER: shut-in testing exemption	[x]			OTHER:			[ ]

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.

Request exemption from shut-in testing due to difficulty in re-establishing production.

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

SIGNATURE [signature] TITLE Production Engineer DATE 10/21/96

TYPE OR PRINT NAME Leo Gallegos TELEPHONE NO. 915-570-5045

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE DATE OCT 25 1996

CONDITIONS OF APPROVAL, IF ANY: