Submit 3 Copies To Appropriate District	State of Ne	w Mexico		Form C-103
Office District 1	Energy, Minerals and	l Natural Resources		Revised March 25, 1999
1625 N. French Dr., Holbs, NM 88240 District II			WELL API NO.	,
1301 W. Grand Ave., Artesia, NM 38210	OIL CONSERVATION DIVISION		5. Indicate Type of	f Lease
District III 1000 Rio Brazos Rd., Artec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE [FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa re, r	CUC/8 IMI	6. State Oil & G	
87505	CIEC ALID PEROPESS CALL	TO 1.0	NM - 2	•
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC		OR PLUG BACK TO A		Unit Agreement Name: FEDERAL
PROPOSALS.) 1. Type of Well: Oil Well Gas Well	Other DISPOSA	1	Gource	
2. Name of Overstor	^		8. Well No.	
KIMLAR OIL	COMPANY, I	UC.	4	
3. Address of Operator P.O. BOX 37 4. Well Location	WINK, TX.		9. Pool name or W HERRADURA	Vildcat 1 BEND DELAWARE)
	2210	0.1 7 51	1150	CAST
41	$\frac{2310}{100}$ feet from the $\frac{50}{100}$			į
Section 3	Township 22-, 10. Elevation (Show whet	her DR, RKB, RT, GR, et	NMPM EDDY	County
	3068 GL			
11. Check A NOTICE OF IN	eppropriate Box to Indic		Report or Other I	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR		PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE [COMPLETION	CASING TEST A CEMENT JOB		·
OTHER:		OTHER:		
2. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
8/15/01 - FOUND HOLE IN CASING AT APPROXIMATELY 370' to 390'. INSTALLED CASING PATCH OVER HOLE AREA.				
+N31	naced chisting		5.2 FOR 1	7 millites.
8/16/01 - PRE	SSURED UP T D PRESSURE	0 320 ⁴⁴ ; H OFF.	ELD FOR 1	T T T T T T T T T T T T T T T T T T T
	- 01 N TO 1	AKPECT TEST	Γ	
8/20/01 - MET				
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				1667 (164) 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880 - 1880
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hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Deaky	Vill TIT	E Sparotan	<i>y</i>	DATE <u>8/27/0/</u>
Type or print name SECk	'y Hill	· · · · · · · · · · · · · · · · · · ·	Telepho	ne No. <u>915-527-33</u> 3
(This space for State use)	Sun	1in Dia	1	0 7-01
APPPROVED BY Conditions of approval, if any:	TITI	E JIZED KEP		DATE 9-7-01