Submit 3 Copies to Appropriate District Office

State of New Mexico .gy, Minerals and Natural Resources Departme

Form	C	-10	3
Revis	ed	1.1	4

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 **DISTRICT II** P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

Indicate Type of	Lease	FEE X
	SIAIE	
	Indicate Type of	Indicate Type of Lease STATE

WELL API NO.

DISTRICT III		. הבמים		STATE	FEE X
1000 Rio Brazos Rd., Azzec, NM 87410		3 REC'D	6. State Oil & Gas Le	pase No.	
SUNDRY NOTICES AND REF					
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR BILICEBACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Un Kidd	it Agreement Name		
I. Type of Well: OIL GAS WELL X WELL	OTHER				
2. Name of Operator R. C. Bennett Company			8. Well No. #1		
P. O. Box 264, Midland, Te	exas 79702		9. Pool name or Wild East Lovin	cai ng Deleware	9
4. Well Location Unit Letter G: 1650 Feet From The North Line and 1650 Feet From The East Line					
Section 15 Township	23S Rar		nmpm Eddy		County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2989 GR					
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO	:	SUBS	SEQUENT REF	PORT OF:	
PERFORM REMEDIAL WORK PLUG AND A	ABANDON 🔲	REMEDIAL WORK	_ AL	TERING CASING	
TEMPORARILY ABANDON CHANGE PL	ANS 🔲	COMMENCE DRILLING	OPNS. DPL	UG AND ABANDO	ONMENT -

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.

Ran 151 Jts of 15.50# & 17# 5½" K-55 Casing. Set @ 6400'. P.B.& D. 6359'. D. V. Tool @ 3100'. Cemented 1st stage W/ 425 sx 50/50 Premium Poz W/ 2% Gel, 5# salt, 4/10% CFR-3, 3/10% HALAD-4. Followed W/ 250sx Premium Plus W/ 5# salt, 4/10% CFR-3. Cemented 2nd stage thru D.V. Tool W/ 400 sx Halliburton Lite W/ 1/4# Flocele & 15# salt, followed W/ 100 sx Premium Plus W/ 2% CACL & 5# salt. Plug Down @ 8:00 am 12-30-90.

OTHER:

CASING TEST AND CEMENT JOB

I hereby certify that the info	rmation above is true and complete to the best of my kno	Windge and balled.	
SIGNATURE	ac 7 m	Agent	1+3-91
	D. E. Nix		(915) TELEPHONE NO. 683-3062
(This space for State Use)	ORIGINAL SIGNED BY		JAN 1 1 1991
APPROVED BY	SUPERVISOR, DISTRICT IT		

CONDITIONS OF APPROVAL, IF ANY:

PULL OR ALTER CASING

OTHER: