Submit 3 Copies to Appropriate Ener District Office	State of New Mexico Minerals and Natural Resources Department	Form C-103 () 5
P.O. Box 1980, Hobbs, NM 58240	CONSERVATION DIVISION P.O. Box 2088	WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM \$8210	Santa Fe, New Mexico 87504-2088	30-015-26460 5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410	00 ¹ 00 100	STATE FEE X
1000 KD BIELS KL, ALS, 191 8/410	OCT 22 '90	6. State Oil & Gas Lease No.
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 ANTES (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name
1. Type of Well: OL GAS WEL X WEL	OTHER	Pardue Farms
2. Name of Operator Oryx Energy Company		8. Well No.
3. Address of Operator P.O. Box 1861, Midland, Tex	kas 79702	9. Pool name or Wildcat Loving, East-Delaware
4. Well Location Unit Letter <u>H</u> : <u>1950</u> Feet F	rom The North Line and 660	Feet From The East Line
Section 10 Town		MPM Eddy County
	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2998,8' GR	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF		
		ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING		
OTHER:	OTHER: Spud_&	Set CSG X
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.		
9-26-90 Spudded 11" hole a K-55, STC CSG set Circ'd 25 SXS to p	at 4:00 p.m. Drilled to 525'. at 525'. Cmt'd w/300 SXS Class bit. WOC 12 hrs.	Ran 13 JTS, 8 5/8", 24#, "C" w/2% CaCl ₂ + .25#/SX Flakes.
K-55 SIC CSG. CS	e to 6270'. Ran 13 JTS 5 1/2", @ 6270'. Cmt'd w/1250 SXS Howco SXS class "H" + 10% salt. Circ'o	15.5#, K-55 STC CSG + 142 JTS, 14# b Lite + 10 PPS Gilsonite. d 157 SXS to pit. WOC 2 days.
I bereby certify that the information above is true and complete to the best of my knowledge and belief. SKONATURE		
TYPE OR PRINT NAME Maria L. Perez	<u>کـــ</u>	TELEPHONE NO. 915/688-0375
(This space for State Use) ORIGINAL SIGN MIKE WILLIAM	¢.	OCT 2 3 1990
APPROVED BY SUPERVISOR, DISTRICT IF TITLE DATE DATE		