	жени. К		7. 0	ISF		
Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural			Form C-103 Revised 1-1-6	39	
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATI		WELL API NO.			
DISTRICT II	2040 Pacheco St. Santa Fe, NM 87505		<u>30-015-31004</u> 5. Indicate Type of Lease			
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III						
1000 Rio Brazos Rd., Aztec. NM 87410	. NM 87410			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" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name James Ranch Unit			
1. Type of Well: OIL GAS WELL X WELL						
2. Name of Operator V	OTHER	8. Well No.				
Bass Enterprises Production Co.			67 9. Pool name or Wildcat			
3. Address of Operator P.O. Box 2760 Midland, TX	79702-2760	Quahada Ridge (Delaware); Southeast				
4. Well Location Unit Letter L : 1874	4' Feet From The South	Line and 109	6' Feet Fro	om The West	Line	
					_	
Section 36		Range 30E ther DF, RKB, RT, GR, et	NMPM c.)	Eddy	County	
	ppropriate Box to Indicate	o Noturo of Notico	Popart or			
-	NTENTION TO:		-	REPORT OF:		
		REMEDIAL WORK		ALTERING CASING		
		GOPNS.				
PULL OR ALTER CASING		CASING TEST AND CE				
OTHER:		OTHER: TD	· · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	X	
12. Describe Proposed or Completed Op work) SEE RULE 1103.	verations (Clearly state all pertinent d	letails, and give pertinent da	ites, including estir	nated date of starting any	proposed	
Drilled 7-7/8" hole to Ran 158 joints 5-1/2" 1 Stage 1: cemented with TOC 5993' (est	5.5#. K-55 LT&C (0-6547'). 285 sacks Super C Mod with	29 joints 5-1/2" 1 additives. Circul	L7# K-55 LT&C lated 45 sack	(6547-7720'). s off DV tool.		
Stage 2: cemented with Plug down @ 1:00 a.m. 4 Rig released @ 5:00 a.m	230 sacks 50/50 Poz C with /12/00. TOC @ 3525' (Temp		vith 100 6735	59707eat.		
Prep for completion.			1 1000 AF	Wy man to the second		
			102	ESIA S		
I hereby certify that the information above is Λ			4 25262	2522212		
SIGNATUREUAML Y	Wilber ,	TITLE Production Cle	rk	DATE6/9/	00	
TYPE OR PRINT NAME Tami Wilber				TELEPHONE NO. 915-68	3-2277	
(This space for State Use)	tim W. Sum	SUPE	R VISOR , DISTR	ICT II	20-	
APPROVED BY		TITLE		DATE	rann	

CONDITIONS OF APPROVAL, IF ANY: