Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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

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

DISTRICT III

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088 VED

WELL API NO.		
5. Indicate Type of Lease STATE X	FEE	

6. State Oil & Gas Lease No.

1000 Rio Brazos Rd., Aziec, Nivi	8/410			65 C	-0	L-701	7		
SUNDRY NOTICES AND REPORTS ON WELLS OFFICE OF NOTICES AND REPORTS ON WELLS OFFICE OF NOTICES 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						
1. Type of Well: OIL C	VELL X	от	HER			F1owe	r Draw U	nit 	
2 Name of Operator Parker & Parsley	y Developme	ent Compa	ny 🏏			8. Well No. 2			
3. Address of Operator P.O. Box 3178, 1						9. Pool name Red B		aware (G	as)
4. Well Location Unit Letter G				Line and	211	O Feet	From The	East	Line
Section 2	То	waship	26S	Range 28E		NMPM	Eddy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	County
		10. Elevation	xa (Show wheth 2963 RKB	ser DF, RKB, RT, Gi	R, etc.)				
Check Appropriate Box to Indicate Nature of Notice, Report, on NOTICE OF INTENTION TO: SUBSEQUE						eport, or O SEQUEN	ther Data T REPO	RT OF:	_
PERFORM REMEDIAL WORK	: F	PLUG AND AB	ANDON [REMEDIAL V	WORK	,	ALTER	ING CASING	L
TEMPORARILY ABANDON		CHANGE PLAN	ıs [COMMENCE	DRILLING	GOPNS.	PLUG	AND ABANDO	NMENT 🗵
PULL OR ALTER CASING				CASING TES	ST AND CE	EMENT JOB			_
OTHER:				_ OTHER:					
12. Describe Proposed or Comp	leted Operations (C	learly state all p	pertinent details	, and give pertinent	dates, inclu	ding estimated	date of starting	any proposed	

- work) SEE RULE 1103.
- Set 4-1/2 CIBP at 3108 and cap w/4 sacks of cement. 1)
- 2) Load hole w/ mud.
- Spot 28 sacks of cement at 620-268'. W.O.C. Tag at 268'. 3)
- 4) Spot 14 sacks of cement at surface and set up P.A. marker.
- 5) Backfilled cellar, cleaned location.

J) Backliffed Collary Casana	10-10-2 5-1-92 Px A
TYPE OR FRINT NAME Thereby certify that the information above is true and complete to the best of my knowledge and belief. Consulting Engineer Type or Frint Name Bob Yeates	DATE 4/15/92 915— TELEPHONE NO. 683–4768
(This space for State Use) APPROVED BY TIME FIELD REP I CONDITIONS OF APPROVAL, IF ANY:	DATE NOV 20.92