+Submit 3 Copies to Appropriate District Office

State of New Mexico E. y, Minerals and Natural Resources Department

C157	Form C 103 Revised 1-1-89
PI NO.	

District Office			₹.₩	
DISTRICT I P.O. Box 1980, Hobbs, NM \$8240	OIL CONSERVATION		WELL API NO.	
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30 015 30064	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STAT	EX FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oila Gas Lease No. V-2372	
(DO NOT USE THIS FORM FOR PR DIFFERENT RESE	ICES AND REPORTS ON WE OPOSALS TO DRILL OR TO DEEPER RVOIR. USE "APPLICATION FOR PEC-101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A	7. Lease Name or Unit Agreeme	ent Name
1. Type of Well: Oil Gas Well Well	f Well:		Cactus l6 State	
2. Name of Operator	OTHER		8. Well No.	nate
Sonat Exploration Co 3. Address of Operator	ompany - Midland	 	9. Pool name or Wildcat	
•	110 W.Louisiana, Ste. 500 Midland, Tx 79701		Deleware	
4. Weii Location Unit Letter P 660		्रेच ः ्री	0 Feet From The	
Section 16	10 Floreties (Shang whatha		VMPM Eddy	County
<i> </i>	1111	3515	///////////////////////////////////	
	Appropriate Box to Indicate		-	0.
NOTICE OF IN		SUB	SEQUENT REPORT	Ur.
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND	ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB	
OTHER:		OTHER Spud, run casi	ng strings, rig release	X
12. Describe Proposed or Completed O	perations (Clearly state all pertinent detail	s, and give pertinent dates, incl	uding estimated date of starting any	r proposed
3-16-98: Spud well with Lakota Rig. 3-17-98: Ran 690', 42#, WC-40 STC surface. Tested casing to 1500#. WG 3-24-98: Ran 4299', 24# & 32#, cen Gunn w/OCD about cement job. Te 4-1-98: Ran 8570', 17#, K-55, LTC, sx to pit, drop bomb, open DV tool, WOC - 24+ hrs. Released rig 4-2-9	OC - 18 hrs. nented with 650 sx lead slurry, 20 sted casing, WOC - 18 hrs. DV tool @ 5992', circulated cem circulated between stages, cemen	0 sx tail slurry, lost retuent - lst stage w/675 sx	rns @ end of cement job, ta	alked with Tim
I hereby certify that the information above is true SIGNATURE TYPE OR PRINT NAME Ann E. Ritchie	n set the plete to the best of my knowledge and	l belief. TLE Regulatory Agent	DATE	8-1-98 nne no 915 684-6381
(this space for State View)				
(this space for State Use)				
APPROVED BY DISTRICT II SI	KED BY TIM W. GUM	TLE	DATE	8-13-98