## State of New Mexico

Minerals and Natural Resources Department Ener

Form C-	103
Revised	1-1-8

DISTRICT I

**OIL CONSERVATION DIVISION** 

		KIÇ				
Р	.0.	Box	1980,	Hobbs,	NM	88240

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

WELL API NO.			
30-015-28495			
Indicate Type of Lease			

«State Oil & Gas Lease No.

2040 Pacheco St.				
Santa Fe,	NM	87505		

cate Type of Lease		
	CTATE	X

**DISTRICT III** 

000 Rio Brazos Rd., Aztec, NM 87410	
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS.)	A 7Lease Name or Unit Agreement Name
Type of Well:  OIL GAS WELL OTHER	Fairchild "13"
₂Name of Operator Nearburg Producing Company	«Well No. 2
*Address of Operator 3300 North A Street, Building 2, Suite 120, Midland, Texas 79705	Pool name or Wildcat     Dagger Draw; Upper Penn, North
4Well Location	

South 1980 West : 660 Feet From The Feet From The Line Line and

Eddy 198 25E County 13 Township Range **NMPM** Section teElevation (Show whether DF, RKB, RT, GR, etc.)

3,410' GR'

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPNS.		PLUG AND ANBANDONMENT	r 🗌
PULL OR ALTER CASING				CASING TEST AND CEMENT JOB			
OTHER:				OTHER: Extension Request			$\mathbf{X}$

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proj work) SEE RULE 1103.

Request extension from previously approved application.

APPROVAL VALID FOR \_\_\_ DAYS PERMIT EXPIRES \_\_\_\_\_\_\_ DAYS UNLESS DRILLING UNDERWAY



I hereby certify that the information above is true and complete to the best of my knowledge and belief.	_
SIGNATURE E. Scott Kinduaush KS TITLE Manager of Drilling and Production	DATE 4-25-98
TYPE OR PRINT NAME E. Scott Kimbrough	TELEPHONE NO. (915) 686-8235

(This space for State Use)

APPROVED BY

I'm W. Gum BGA TITLE District Supervisor

CONDITIONS OF APPROVAL, IF ANY: