Submit 3 Copies to Appropriate

CONDITIONS OF APPROVED STATES OF

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103	di
Revised 1-1-89	l

to Appropriate District Office		Energy, Milleran	s and Natural Resources Department			Revised 1-1-89	W
DISTRICT 1 P O Bax 1980, Hobbs, NM 88240 DISTRICT 2	OIL CONSERVATION DIVISION			WELL APTINO. 30-015-29711			
P.O. Drawer DD, Artesia, NM 88210		P.O. Box 2088			5. Indicate Type of Lease		
DISTRICT 3 1000 Rto Brazos Rd., Aztec, NM 87410		Santa Fe	:, New Mexico 87504-2088		State State OI & Gas Ce		
	SUNDRY NOTIC	ES AND REPORT	S ON WELLS				
(DO NOT US	E THIS FORM FOR PROP	OSALS TO DRILL OR	TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Uni	t Agreement Name	
	DIFFERENT RESERVO	OIR. USE "APPLICATI	ON FOR PERMIT"				
	(FORM C-10	01) FOR SUCH PROPO	DSALS.)			Mallon 16 Sta	ıte
Type of Well: OIL GAS WELL X WELL	OTHER						
2. Name of Operator Mallon Oil Comp	nany				8. Well No.		
3. Address of Operator	Jany	**					
P.O. Box 3256,	Carlsbad, NM 88220				9. Pool name or Wildo Wildcat, Black	_{at} k River Delawar	e, West
4. Well Location Unit Letter	<u>E</u> : _	2080'	Feet From The North Line and	660'	Feet From The	West Line	
Section	16	Township 24	S Range	26E	NMPM	Eddy count	. .
		WWW.	ow whether DF, RKB, RT, GR, etc.)				
			3441' GL				
NOTICE	Check A OF INTENTION TO:	appropriate Box to the	ndicate Nature of Notice, Report, or		T REPORT C)F	
PERFORM REMEDIAL WORK	PLUG AND AB	IANDON	REMEDIAL WORK			ING CASING	
TEMPORARILY ABANDON	CHANGE PLAY	ns 🔲	COMMENCE DRILLING OPNS.			ND ABANDONMENT	
PULL OR ALTER CASING			CASING TEST AND CEMENT JOB				
OTHER: Extension	of APD	X	OTHER:				Х
12. Describe Proposed or Completed Opi	erations (Clearly state all pertinent	details, and give pertinent dates	including estimated date of starting any proposed work). S	SEE RULE 1103.			
Mallon Oil Co	ompany requests	a one-year exte	ension on Application for Per	rmit to Dril	l.	A	
					<u>.</u>	13 MW	
						CEIVED	
						- ARTESIA	
		APPROVAL V PERMIT EXPI UNLESS DRI	ALID FOR DAYS RES 4-22-9 LLING UNDERWAY				
t hereby certify that the information above SIGNATURE	yserran		Production Secretary	DATE	4/6	4/98	
TYPE OR PRINT NAME Chri	ty Serrano			TELEP	IONE NO.	505-885-4596	i
(This space for State Use)							