Submit 3 Copies	S	tate of New Mexico		Form C-103
To Appropriate	Energy, Minerals	and Natural Resources Depart	ment/	Revised 1-1-89
District Office		-	/ -	
<u>DISTRICT I</u>	OIL CONS	ERVATION DIVIST	ÓN 📑	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240		2040 South Pacheco		
		anta Fe, NM 87505		30-045-32733
DISTRICT II	5	anta 1 c, 14141 07505		5. Indicate Type of Lease
811 South First, Artesia NM 88210				STATE FEE
off South First, Attesta NW 66210		443	· Pro-	STATE TEE
DISTRICT III		10/11/2/5	1470	6. State Oil & Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410			20/20 V	17036
1000 Kio Brazos Rd., Aziec, NW 87410		A. S.		17030
CLD IDDX NOTIC	EC AND DEDOI	TE ON WEST OF THE	Vo. 1	Lease Name or Unit Agreement
SUNDRY NOTIC			005	Name:
(DO NOT USE THIS FORM FOR PROP				Name.
DIFFERENT RESERVOIR. USE "A		ERMIT" (FORMÆ-101)ÆÐR SUÇ	H P	COX CANYON UNIT
	PROPOSALS	/c-7		y con chivron on
1. Type of Well:		- VA/2		
	as Well	Other Con 17	200	
2. Name of Operator		OC BC LC	A TURE	8. Well No.
WILLIAMS PRODUCTION COMPAN	NΥ			6B
3. Address of Operator				9. Pool name or Wildcat
, and the second				
P O BOX 3102, MS 25-2, TULSA, OK	74101			BLANCO MV
4. Well Location (Surface)				
Unit letter O: 1305 feet from t	he SOUTH line &	2095 feet from the EAST li	ine Sec 10	6-32N-11W SAN JUAN NM
The second secon		whether DF, RKB, RT, GR, etc.		
	10. 210.111011 (011011	6861' GR		
		3001 010		A CONTRACTOR OF THE PARTY OF TH
Chaols A	nnnanniata Day ta	Indicate Nature of Nation	Donom	on Other Dete
		Indicate Nature of Notice		
NOTICE OF INTENT		·	QUENT I	REPORT OF:
PERFORM REMEDIAL PLUG	AND ABANDON	REMEDIAL WORK		ALTERING CASING

WORK

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPNS: Spud

PLUG AND **ABANDONMENT**

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER:

OTHER:

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103.

This well was spud @ 0900 hrs 02/09/05

I hereby certify that the information above is true and comp	plete to the best of my knowledge and belief.	
SIGNATURE TRACY ROSS	TITLE:SR_Production Analyst	DATE: February 15, 2005 .
Type or print name TRACY ROSS		Telephone No: _(918) 573-6254
(This space for State use) APPROVED		MAR 1 4 2005
Conditions of approval, if any:	TITLE SUPERVISOR D	ISTRICT # 3