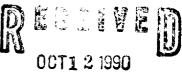
Sub mit 3 Cos to Appropriate District Office

State of New Mexico Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-59 OIL CONSERVATION DIVISION DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-045-27514 Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lesse No. B 11479-10 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: FC STATE COM WELL 2. Name of Operator 8. Well No. MESA OPERATING LIMITED PARTNERSHIP # 7 3. Address of Operator 9. Pool name or Wildcat P.O. BOX 2009, AMARILLO, TEXAS 7918-Basin Fruitland Coal 1405,830 South Line and Feet From The Line 36 30N 9W Township San Juan Section **NMPM** Range County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5750' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **CHANGE PLANS** TEMPORARILY ABANDON COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB TD NOTICE/PROD CASING 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. The above referenced well TD'd @ 2580' on 10/8/90. RU and ran 5 1/2" 17# I-70 LT&C casing, set @ 2580'. Cemented with 375 sx 65% "B"/35% Poz followed by 200 sx Class "B". Circulated good cement to surface. WOCU Will test casing when RU to complete.



OIL CON. DIV. DICT 2

DATE

xc: NMOCD-A (0+6), WF, Reg, Land, Expl	., Drlg.
I hereby certify that the information above to true and complete to the best of my knowledge and belief.  SIGNATURE ST	Regulatory Analyst
TYPE OR FRINT NAME Carolyn L. McKee	(806) 378–1000 TELEPHONE NO.
(This space for State Use) Original Signed by FRANK T. CHAVEZ	NCT 1 9 1000

CONDITIONS OF APPROVAL, IF ANY:

SUPERVISOR DISTRICT # 3