Submit 3 Copies

APPROVED BY_

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico

Form C-103

_____DATE__

to Appropriate	Energy, Minerals and Natura	Energy, Minerals and Natural Resources Department		Revised 1-1-89		
District Office	OIL CONSERVAT	ION DIVISION				
P.O. Box 1980, Hobbs NM 88241-1980 DISTRICT II Santa Fe, NM 87505		eco St.	WELL API NO. 30-045-	30273		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lea	STATE	FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Leas	e No.		
SUNDRY NOTICES AND REPORTS ON WELLS						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name Aztec Com 4			
1. Type of Well: OIL GAS WELL WELL WELL	OTHER				·····	
2. Name of Operator			8. Well No.			
Cross Timbers Operating Company			1E 9. Pool name or Wildcat			
3. Address of Operator 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401			Basin Dakota / I	31anco Mesa	<u>werde</u>	
4. Well Location Unit Letter M : 1.0	Feet From The Sout	th Line and8	Feet From The	West	Line	
16	Township 30N	Range 11W	NMPM Sai	n Juan	County	
Section 10	10. Elevation (Show w	whether DF, RKB, RT, GR, e	tc.)			
Chools A	Appropriate Box to Indic			er Data		
	INTENTION TO:	SU	BSEQUENT RI	EPORT ()F:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ AL	TERING CASIN	ig [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	IG OPNS. L PLI	JG AND ABAN	DONMENT L	
PULL OR ALTER CASING		CASING TEST AND	CEMENT JOB			
OTHER:		OTHER: Drill ou	it DV tool & press	test prod	_csg	
12. Describe Proposed or Completed (Operations (Clearly state all pertine	ent details, and give pertinent	dates, including estimated	date of startin	g any proposed	
work) SEE RULE 1103.						
01/13/01 to 01/17/01: WLM. Drilled out ceme minutes. Held OK.	Move in completion rig. ent to 6,906' PBTD. Pres	Installed BOP. Dr sure tested 4-1/2" p	illed out cement & roduction casing t	DV tool a to 2,500 ps	t 3,4/6 ig for 30	
			12 12 12 12 12 12 12 12 12 12 12 12 12 1			
				just .		
I hereby certify that the information above	e is true and complete to the best of my k	nowledge and belief.				
/ \ / \ A ₂ A	ntw	_ тить Operations Er	ngineer	_ DATE	01/22/01	
TYPE OR PRINT NAME Ray Martin	1		TE	LEPHONE NO.	324-1090	
(This space for State Use)						
OPERINAL SACRESS	· · · · · · · · · · · · · · · · · · ·	PEPUTY OIL & GAS	S INSPECTOR, DIST AS	JAN	2 2 2001	

__ TITLE ___