## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

DISTRIC	TI .			
P.O. Box	1980,	Hobbs,	MM	88240

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-045-27525	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE	FEE 🗌
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lesse No. E 5388-1	
( DO NOT USE THIS FORM FOR PRODIFFERENT RESE	ICES AND REPORTS ON WELL OPOSALS TO DRILL OR TO DEEPEN ( RVOIR. USE "APPLICATION FOR PER -101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Nam	//////// #
I. Type of Well: Oil. GAS WELL X	OTHER		FC STATE COM	
2. Name of Operator	LIMITED PARTNERSHIP		8. Well No. # 13	
3. Address of Operator	AMARILLO, TEXAS 79189		9. For arms or Wildent Basin Fruitland Coal	
4. Well Location		1225	<u></u>	
Unit Letter :970	Feet From The South	Line and		Line
Section 36	Township 32N Ram	<u> </u>	NMPM San Juan	County
	10. Elevation (Show whether L	318' GR		
	Appropriate Box to Indicate N	•	•	
NOTICE OF IN	TENTION TO:	505	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASIN	G 📙
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. LI PLUG AND ABAN	DONMENT
PULL OR ALTER CASING		CASING TEST AND C		
OTHER:		OTHER: SPUD N	OTICE/SURFACE CASING	[X]
12. Describe Proposed or Completed Oper work) SEE RULE 1103.	ntions (Clearly state all pertinent details, an	d give pertinent dates, incli	uding estimated date of starting any propose	ıd
Drilled to '233'. Ceme	eferenced well was spud ID of 238', RU and ran 8 nted with 150 sx Class " ace casing to 1000 psi.	5/8" 24# K55 B", Circulated	ST&C casing, set @ good cement to surface.	
-			SEP 0 4 1990	
			02.	,
vc• NMOCD-∆	(0+6), WF, Reg, Land, E	vnl. Drlo.	OM CON. DIV	/ • <u>.</u>
<b>^</b>	ue and complete to the best of my knowledge and			•
SIGNATURE Alalys	$\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$	Sr. Regulator	y Analyst DATE 8/3	31/90
TYPE OR PRINT NAME			TELEPHONE NO.	
(This space for State Use)	· ·	CHOCOVICAD	DISTRICT # 2 CED	0 4 1990
ATTROVED BY Original Signed by F	RANK T. CHAYEZ	SUPERVISOR	DISTRICT #3 DATE SEP	U + 1300