Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico

Form C-103 Revised 1-1-89

## Energy, Minerals and Natural Resources Department

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  OIL CONSERVA		WELL API NO.			
P.O. Box 2088  DISTRICT III P.O. Drawer DD, Artesia, NM 88210  DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410  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.)		30-045-28674  5. Indicate Type of Lease STATE FEE X  6. State Oil & Gas Lease No.  7. Lease Name or Unit Agreement Name			
			Type of Well: Oil GAS WELL OTHER		Manhana 25
			Name of Operator	<u> </u>	Montoya 25
			Hallwood Petroleum, Inc.		2
Address of Operator		9. Pool name or Wildcat			
P.O. Box 378111 Denver, CO Well Location	80237	Basin Fruitland Coal			
Unit Letter K : 1625 Feet From The South	Line and22	0 Feet From The West Line			
Section 25 Township 32N	Range 13W	NMPM San Juan County			
10. Elevation (Show w	whether DF, RKB, RT, GR, etc.)	VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			
2,175					
. Check Appropriate Box to Indi		•			
NOTICE OF INTENTION TO:	SUE	SEQUENT REPORT OF:			
RFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING			
MPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT			
ILL OR ALTER CASING	CASING TEST AND C	EMENT JOB			
THER:	OTHER: Notice	of Spudding			
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pertinent de work) SEE RULE 1103.</li> </ol>		ding estimated date of starting any proposed			
Spud 12 1/4" hole 1:00 p.m. 6,	/29/92.				
Aztec Well Service drilling ri					
	ig #301.				
	ig #301.				
	ig #301.				
	ig #301.	186 21 2 E D			
	S. S	3 327 2 \$ 10.5			
	S. S	30 0 5 10 2 31. CORS, OEV.			
	S. S	3 37 1 5 10 2			
	S. S	30 0 5 10 2 31. CORS, OEV.			
	S. C. COMPANY OF THE	30 0 5 10 2 31. CORS, OEV.			
I hereby certify that the information above is true and complete to the best of my knowle	S. C. COMPANY OF THE	M. COM, OW.  WES. 8			
I hereby certify that the information above is true and complete to the best of my knowledge.	edge and belief.	M. CON, ON. MS. 9			