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U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
RONALTO

9. Well No.
2

10. Field and Pool, or Wildcat
EAST CAPROCK PENN

11. Elevation (Show whether DF, RT, GR, etc.)
4330.8 GL

12. County
LEA

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.)

OIL WELL GAS WELL OTHER-

Name of Operator
RONADERO COMPANY, INC.

Address of Operator
P. O. BOX 430, ROSWELL, NEW MEXICO 88201

Location of Well
UNIT LETTER 0, 2310 FEET FROM THE EAST LINE AND 330 FEET FROM
THE SOUTH LINE, SECTION 14 TOWNSHIP 12S RANGE 32E N14PM.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

8/28/85 - Ran 86 jts (3658') 8 5/8" 24# and 32# casing at 3650' - cemented w/1450 sxs B.J. Lite plus 10# salt per sx plus 200 sx Class C and 2% CaCL - plug down at 1:45 p.m. - circulated out 100 sx - test BOP, pipe rams and blanks w/1500# - held OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Robert H. Langston TITLE Vice President DATE 8-29-85

ORIGINAL SIGNED BY DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

1985

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AUG 30 1985

OFFICE
OF THE ATTORNEY GENERAL