

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

Well API No. 30-041-20047

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
E 8948

7. Lease Name or Unit Agreement Name
Todd Lower San Andres Unit
Sec. 31

8. Well No.
1

9. Pool name or Wildcat
Todd Lower San Andres Assoc.

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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.)

1. Type of Well:
OIL WELL GAS WELL OTHER WIW

2. Name of Operator
Plains Petroleum Operating Company

3. Address of Operator
415 W. Wall, Suite 2110 Midland, Texas 79701

4. Well Location
Unit Letter A : 460 Feet From The N Line and 660 Feet From The E Line
Section 31 Township 7S Range 36E NMPM Roosevelt County

11. 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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>Convert to WIW</u> <u>702X-544</u> <input checked="" type="checkbox"/>	

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.

6-20-90 WIH w/5-1/2" x 2-3/8" nickel coated Arlington Elder Lokset pkr & 133 jts 2-3/8" internally coated plastic coated Sealtite tbg, set pkr @ 4153', test csg-tbg annulus & pkr to 500 psi, held OK.

7-5-90 NU wellhead injection assembly.

8-1-90 Ran pkr integrity test for OCD, rep took chart.

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

SIGNATURE Bonnie Husband TITLE Engineering Tech DATE 8-7-90

TYPE OR PRINT NAME Bonnie Husband TELEPHONE NO. 915 683-4434

(This space for State Use) ORIGINAL SIGNED BY JOSEY SEXTON DATE AUG - 9 1990

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

N B

E