

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.	30-025-28455
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E-9118
7. Lease Name or Unit Agreement Name	
State "21"	
8. Well No.	2
9. Pool name or Wildcat	Northeast Lovington Penn
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
GR 3803	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Amerind Oil Company Limited Partnership
3. Address of Operator 425 West Wall St., Suite 500, Midland Tx 79701-4467
4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>21</u> Township <u>16S</u> Range <u>37E</u> NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3803

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 checked="" 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: _____ <input 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.

- Set CIBP @ 11,300' cap w/2 sx cmt
- Displace csg w/10 lb brine water & 25 lb gel/bbl
- Plug No. 2 30 sx @ 8900'
Plug No. 3 30 sx @ 6410'
- Cut 5-1/2" csg @ 7600', recover
- Plug No. 4 60 sx @ 7650'
Plug No. 5 60 sx @ 4270'
Plug No. 6 45 sx @ 2163'
Plug No. 7 10 sx @ 30'
- Weld on dry hole marker. Salvage equipment. Clean and level equipment.
- Report

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

SIGNATURE JAMES E. YELEY TITLE Agent DATE 10/6/97

TYPE OR PRINT NAME James E. Yeley TELEPHONE NO. 915/682-8217

(This space for State Use) Paul Keate Geologist **OCT 07 1997**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

