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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.  
L-1057

SUNDRY NOTICES AND REPORTS ON WELLS  
DO NOT USE THIS FORM FOR APPLICATION TO DRILL OR TO RE-ENTER OR PUMP BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

1. OIL WELL  GAS WELL  OTHER

2. Name of Operator  
Energy Reserves Group, Inc.

3. Address of Operator  
P.O. Drawer 2437 Midland, Texas 79702

4. Location of Well  
UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM  
THE East LINE, SECTION 18 TOWNSHIP 18-S RANGE 35-E N.M.P.M.

5. Elevation (Show whether DF, RT, GR, etc.)  
3960' G.L.

6. Farm or Lease Name  
Amoco "B" State

7. Unit Agreement Name

8. Well No.  
1

9. Field and Pool, or Wildcat

10. County  
Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON   
CHANGE PLANS

OTHER

SUBSEQUENT REPORT OF:

REMEDIAL WORK   
COMMENCE DRILLING OPNS.   
CASING TEST AND CEMENT JOB

ALTERING CASING   
PLUG AND ABANDONMENT

OTHER

17. 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.

Plan to pull 341' 8-5/8" casing. Will fill hole with ready-mix concrete (estimate 22 yards) and install dry hole marker to abandon well.

Discussed above procedure with John Runyan on 8/21/78 by phone.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNED R. L. Robertson R. L. Robertson TITLE Production Engineer II DATE 8/21/78

APPROVED BY Jerry Seaton Jerry Seaton TITLE Dist. 1. Supv. DATE AUG 25 1978

CONDITIONS OF APPROVAL, IF ANY: