

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

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. 30-037-20050
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. N/A

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	7. Lease Name or Unit Agreement Name Stansberry-Cox
2. Name of Operator Tenison Oil Company	8. Well No. 1
3. Address of Operator 8140 Walnut Hill Lane, #601, Dallas, Texas 75231	9. Pool name or Wildcat Wildcat
4. Well Location Unit Letter <u>I</u> : <u>1942.2</u> Feet From The <u>South</u> Line and <u>676'</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>13N</u> Range <u>33E</u> NMPM Quay Country	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3985 GL</u>	

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 checked="" 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.

10/16/92 Ran 8-5/8" 24# casing to 707' inside 10-3/4" casing and 10" hole.
Mixed and pumped 200 sx cement, circulating to surface with good returns.

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

SIGNATURE Bruce C. Macke TITLE Operations Manager DATE 10/22/92
 TYPE OR PRINT NAME Bruce C. Macke TELEPHONE NO. (214) 363-5005

(This space for State Use)

APPROVED BY Ry Johnson TITLE DISTRICT SUPERVISOR DATE 11-2-92
 CONDITIONS OF APPROVAL, IF ANY: