Submit 3 Copies To Appropriate District Office State of New Mexico		Form C-103
Office District I 1625 N. French Dr., Hobbs, NM 87240 District II CONSERVATION DIVISION		Revised March 25, 1999 WELL API NO.
1625 N. French Dr., Hobbs, NM 27240 District II 811 South First, Artesia, NM 27210 CIL CONSERVATION DIVISION 2040 South Pacheco		30-015-32696 5
District III SON NAY 2003 Santa Fe, NM 87505		5. Indicate Type of Lease STATE X FEE
District IV 2040 South Pacheco, Santarfe, NN087505 ARTESIA		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM TOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Soapberry Draw "7" State
1. Type of Well: Oil Well X Gas Well Other		
2. Name of Operator		8. Well No.
Fasken Oil and Ranch, Ltd. 3. Address of Operator		1
303 W. Wall Ave., Suite 1800, Midland, TX 79701-5116		9. Pool name or Wildcat Undes. Catclaw Draw; Delaware, East
4. Well Location		
Unit Letter K : 2100 feet from the	south line and	1980 feet from the west line
Section 7 Township 21S	Range 26E	NMPM County Eddy
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3271'		
11. Check Appropriate How to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON		SEQUENT REPORT OF:
TEMPORARILY ABANDON	COMMENCE DR	
PULL OR ALTER CASING MULTIPLE COMPLETION	CASING TEST A	AND ABANDONMENT
OTHER:	OTHER: TD, set	productioncasing
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.		
Reached TD of 4000' on April 30, 2003 drilling a 7 7/8" hole. Ran 3998' of 5 1/2", 15.5#, J-55, LTC casing. Cemented with 425 sx Super C Modified (15#/sx Poz A and 11#/sx CSE) 5% salt and 1.1% FL-25 (s.w. 14.2ppg, yield 1.38 cu. ft./sx). Top of cement at 480' by temperature survey.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Regulatory Affairs Coordinator DATE 5/5/03		
Type or print name Jimmy D. Carlile		Telephone No. (432) 687-1777
(This space for State use)	0	
APPPROVED BY Sian let Sum TIT Conditions of approval, if any:	LE Ristrict Sup	DATE MAY 0 9 2003

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