70 Appropriate District	State of New Mexico		Form C-103
	Energy, Minerals and Natural Resources French Dr., Hobbs, NM 88240		October 13, 2009
French Dr. Hobbs NM 88240			WELL API NO.
A Act II	ot II		30-015-22827
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE ⊠ FEE □
1000 Rio Brazos Rd, Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	,		o. Suite on to our Education.
87505			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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.)			STATE B -1969 TR1
1. Type of Well: Oil Well Gas Well Other			8. Well Number
			#11
2. Name of Operator			9. OGRID Number
CFM OIL COMPANY			3322
3. Address of Operator			10. Pool name or Wildcat
PO BOX 1176 ARTESIA NM 88210			EMPIRE YATES SEVEN RIVERS EAST
4. Well Location			
Unit Letter O :	990 feet from the S	line and 23	feet from the E line
Section 22	Township 17S		NMPM County EDDY
		Range 28E	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
			
TEMPORARILY ABANDON			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
DOWNHOLE COMMINGLE			,
OTHER:	П	OTHER:	
OTHER: OTHER:			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of			
arenaged completion or recompletion			
Proposed completion of recompletion.			
CLEAN OUT TO 810'			MAR 1 0 2010
BAIL DRY			
FILL TO SURFACE WITH CEMENT SLURRY			NMOCD ARTESIA
			•
		<u> </u>	
Spud Date:	Rig Release Da	ite:	
		L	
I hereby certify that the information a	bove is true and complete to the be	est of my knowledge	e and belief.
A MATERIAL DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE			
SIGNATURE SIGNAT			
Type or print name <u>LESLIE PATTERSON</u> E-mail address: <u>lesliewpatterson@msn.com</u> PHONE: <u>575-746-3099</u>			
For State Use Only			
allt	-2		a lula a
APPROVED BY:	TITLE		DATE 3/11/2010
Conditions of Approval (if any):			/ /
Annaval Granted providing work			
	Approval Granted providing, work is complete by 6/1/20/0		
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Notify OCD 24 hrs. prior To any work done.

