

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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JIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED BY
NOV 14 1984
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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. OIL WELL GAS WELL OTHER

2. Name of Operator
Blanco Engineering, Inc. ✓

3. Address of Operator
116 North First Street, Artesia, New Mexico 88210

4. Location of Well
UNIT LETTER G 1650 FEET FROM THE East LINE AND 1980 FEET FROM
THE North LINE, SECTION 25 TOWNSHIP 18S RANGE 26E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3277 GR

7. Unit Agreement Name

8. Farm or Lease Name
Williams

9. Well No.
9

10. Field and Pool, or WHDcat
Atoka Glorietta Yeso

12. County
Eddy

16. 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Drilled 7 7/8" hole to 3800'. Circulated 2 hours. Trip out with Drill Pipe. Ran 91 joints of 5 1/2"-15.5#-New Casing to 3800'. Cemented with 375 sxs Howco Lite with 1/4# flocele/sack, plus 350 sxs 50/50 Pozmix with 2% Gel, 4# salt per sack and 3/10% CFR2. Plug down at 12:45 p.m., November 9, 1984. Circulated 145 sxs to nit.

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

SIGNED James Sushita TITLE President DATE November 12, 1984

APPROVED BY _____ TITLE Original Signed By
Leslie A. Clements DATE NOV 16 1984
Supervisor District II

CONDITIONS OF APPROVAL, IF ANY: