Submit 3 Copies to Appropriate
District Office

11.

OTHER:

TEMPORARILY ABANDON

PULL OR ALTER CASING

CONDITIONS OF APPROVAL, IF ANY:

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

WELL APLNO

P.O. Box 2088	30-015-29297
Santa Fe, New Mexico 87504-2088	30 013 23237

5. Indicate Type of Lease

STATE FEE XX 6. 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: South Boyd "27" GAS WELL WELL XX OTHER 2. Name of Operator 8. Well No. #9 Nearburg Producing Company 3. Address of Operator 9. Pool name or Wildcat P. O. Box 823085, Dallas, TX75382-3085 Dagger Draw, Upper Penn, North Well Location 990 Feet From The 1,980' North Unit Letter _ Feet From The Line and Line 27 19 25E Eddy Township Range Section County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,450' GR

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON

ALTERING CASING REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT

CHANGE PLANS

CASING TEST AND CEMENT JOB Production csq. & cement

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.

Drilled to 8,284'. LD DP & DC's. RU & run 229 jts. 7" 23# and 26# N80 and K55 STC, BTC and LTC. Wash 40' to bottom w/18' of fill. C&C hole. Cmt. 1st stage w/450 sx cmt. and additives. Circ. 35 sx cmt. to surf. Cmt. 2nd stg. w/800 sx. and additives. Circ. 96 sx. cmt. to surf. ND BOPE and clean pits. Released rig.

RECEIVE

FFR 2 1 1997

ON CON. DIV.

		<u> </u>
I hereby certify that the information above is true and complete to the best of my knowledgestonature		2-17-97 DATE
TYPEORPRINTNAME Kim Stewart		(915)686-8235 TELEPHONE NO.
ORIGINAL SIGNED BY TIME W. GUM DISTRICT II SUPERVISOR	TITLE	FEB 2 7 1997