Submit 3 Copies To Appropriate District Office State of N Energy, Minerals and	ew Mexico I Natural Resources		Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 87240	. I tatalal Resources	WELL API NO.	Way 27, 2004
District II OUSERVA	ATION DIVISION	30-015-27090	
District III 1220 South S	St. Francis Dr.	5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, District IV	NM 87505	STATE 🔀 FI	EE 🗌
1220 S. St. Francis Dr., Santa Fe, NM 87505		6. State Oil & Gas Lease N V-4460-2	[o.
SUNDRY NOTICES AND REPORTS OF COMMON CONTROL OF	M C-101) FOR SUGE	7. Lease Name or Unit Agr	eement Name:
1. Type of Well:		8. Well Number	
Oil Well 🕱 Gas Well 🗌 Other 🔯	222 13/14 13/14 13/14 13/14	1	
2. Name of Operator	4 32	9. OGRID Number	
RAY WESTALL \Z	· 夏昭 · */	10 D 1 W/11	
3. Address of Operator BOX 4. LOCO HILLS, NM. 88255	4963	10. Pool name or Wildcat	ļ
BOX 4, LOCO HITLS, NM 88255 4. Well Location	150592.00	DELAWARE	
		F.CO	
Unit Letter P: 800 feet from the _	SOUTH line and	560 feet from the	EAST line
	9S Range 31E	NMPM Count	y EDDY
11. Elevation (Show we	hether DR, RKB, RT, GR, e	tc.)	
Pit or Below-grade Tank Application or Closure			
Pit type STEEL Depth to Groundwater Distance from near	rest fresh water well Di	stance from nearest surface water .	
Pit Liner Thickness: mil Below-Grade Tank: \	Volumebbls; Constructi	on Material	
12. Check Appropriate Box to In NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING MULTIPLE COMPLETION	SUE	SSEQUENT REPORT (ALTEI ING OPNS. ABAN	RING CASING
OTHER:	OTHER:		
 Describe proposed or completed operations. (Clearly state of starting any proposed work). SEE RULE 1103. For Mor recompletion. 10-23-06 Set 5 1/2" CIBP@4,500'. Cap w/35' cm @2,250'. 	Multiple Completions: Attack	h wellbore diagram of propose	ed completion
10-24-06 No Tag. Spot 25 sx. cmt. @2,250'. Ta Spot 25 sx. cmt. @875'. Tag plug @64			@1,150'.
10-25-06 Install Dry Hole Marker.	under bond is ret	lugging of the well bore. Liability ained until surface restoration, mediation and final inspection is	
I hereby certify that the information above is true and complete grade tank has been/will be constructed or closed according to NMOCD g	to the best	niculation and imar mopeowers	pit or below- proved plan
SIGNATURE Ausly/Coacl	<i></i>	MANAGER DATE	10-27-06
′	E-mail address:		
Type or print name DUSTY ROACH	E-man address.	Telephone No	.
		•	
Type or print name DUSTY ROACH For State Use Only APPROVED BY	Geny G Deputy Field	}uye	NOV 9 2006