Submit 3 Copies to Appropriate District Office

State of New Mexico y, Minerals and Natural Resources Departm

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

WELL API NO. 30-005-00380

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

	30-003-00300
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	A 7. Lease Name or Unit Agreement Name Mayohn
1. Type of Well: OL. GAS WELL WELL OTHER	
2. Name of Operator Stevens Operation	8. Well No.
3. Address of Operator 2408 Roswill 7M 88202	9. Pool name or Wildcar
4. Well Location	60 Feet From The East Li.
Section // Township /3 Range 28	NMPM Chaves County
11. Check Appropriate Box to Indicate Nature of Notice	e, Report, or Other Data
	UBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL	LING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMENT JOB	
OTHER: OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, work) SEE RULE 1103.	including estimated date of starting any proposed
2-15-96 Ricy up Physing equipment	
-16-96 sich up + run in hole with 30	osts of the.
2-15-96 Rich up thy and sun in hole with 30 -19-96 Rich up thy and sun in hole	to 5394 Where
We tagged up. This is 1806 ft	high. I called
Zim Sum + orders were to star	I setting pluggs.
Remped a 60 st plug e 5394	! Wo cover night.
2-20-96 Run in hale with they + tag ship	e 5110, 254 plug.
I hereby certify that the information above is true and complete to the best of my knowledge and being.	1 01 0 + 2 2/6/6
SIGNATURE CONTROLLED THE DEPUTY (MA	Y Las Inspector DATE 2-26-94 748-1283 TELEPHONE NO.
TYPE OR PRINT NAME Kay JMITh	IBLEFFICAE NO.
(This space for State Use)	In Insection DATE 2-28-94
APPROVED BY VILLE INV	