NO. OF COPIES RECEIVED			Form C-103	
DISTRIBUTION			Supersedes Old C-102 and C-103	
SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65	
FILE	2/1/	HE-CHI ED	5a. Indicate Type of Lease	
U.S.G.S.			State Fee X	
LAND OFFICE		MAR 2 2 1983		
OPERATOR	V		5, State Oil & Gas Lease No.	
		O.C.D	mmmmm.	
(DO NOT USE THIS FOR	SUNDE	NOTICES AND REPORTS ON WELLS ARTESIA OFFICE OSALS TO DRILL OF TO DEEPEN OF PLUG BACK TO A DIFFERENT RESERVOIR.		
1. OIL X GAS		OTHER-	7. Unit Agreement Name	
2. Name of Operator		OTHER.	8. Farm or Lease Name	
1	Evnlo	ution , Corp. V	Moonshine 7 Batt.#2	
3. Address of Operator	EXPIO	teron , corp.	9. Well No.	
	2 Ari	esia, New Mexico 88210	#4	
4. Location of Well	O, AL	ola, new	- 10. Field and Pool, or Wildcat	
1		.650 FEET FROM THE North LINE AND 330 FEET FR	Twin Lakes SA Assoc.	
1				
THE West L	INE, SECTI	7 TOWNSHIP 9S RANGE 29E NM	PM. (	
mmmmm	77777	15. Elevation (Show whether DF, RT, GR, etc.)	12. County	
		3913 GR	Chaves	
	<u> </u>		Other Data	
		ppropriate Box To Indicate Nature of Notice, Report or tention to:    SUBSEQUE	ENT REPORT OF:	
PERFORM REMEDIAL WORK	]	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	]	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	]	CHANGE PLANS CASING TEST AND CEMENT JQB X	_	
		OTHER		
OTHER				
	1.10	erations (Clearly state all pertinent details, and give pertinent dates, includ	ling estimated date of starting any propose	
17. Describe Proposed or Co work) SEE RULE 1 f03.	mpleted C	erations (Clearly state air pertinent details, and give pertinent and		
•				
10-13-81	TD	780 Ran 2770' of 4½" 10.5# & 11.6# casing.	10 tainta of .	
		Casing as follows 27 joints of 10.5# (1088.61') & 42 joints of		
	11.	11.6# (1681.39') .		
	Cem	mented w/500 sxs Halliburton Light w/10# salt per sack +		
		sxs $50/50$ poz mix $w/2\%$ gel + $8\#$ salt per sack.	•	
		nt did not circulate.	inutoa	
		18 hours & pressure tested to 1000# for 30 mi	mutes.	
	Hel	ok.		
11-16-81		orated 1 shot @ 2627.5, 2628, 2629, 2632, 2633 .5, & 2643 Total shots: 9	3, 2634, 2642,	
11-17-81		ized w/5000 gals 20% NE acid.		
11 1, 01				
		the state of the state and bester		
18. I hereby certify that the	informatio	above is true and complete to the best of my knowledge and belief.		
ELENTO DIESE	こ こ	TITLE Production Clerk	DATE 3-10-83	
		Original Signed By	MAD 0 4 4000	
		Leslie A. Clements	MAR 2 4 1983	

Supervisor District II

CONDITIONS OF APPROVAL, IF ANY: