

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 1000
SANTA FE, NEW MEXICO 87501

MAY 09 1983

O. C. D.

ARTESIA, OFFICE

Form C-103
Revised 10-1-78

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name N/A
Name of Operator JACK GRYNBERG ✓	8. Farm or Lease Name "COM" Horse Creek State
Address of Operator 5000 South Quebec, Suite 500, Denver, CO 80237	9. Well No. #2
4. Location of Well UNIT LETTER <u>C</u> <u>660'</u> FEET FROM THE <u>North</u> LINE AND <u>1980'</u> FEET FROM THE <u>West</u> LINE, SECTION <u>4</u> TOWNSHIP <u>5 S</u> RANGE <u>24 E</u> NMPM.	10. Field and Pool, or miscat Pecos Slope Abo
15. Elevation (Show whether: DF, RT, GR, etc.) 3990.5' GL	12. County Chaves

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>30 Day Report</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Complete Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4/4/83 SI waiting on pressure build up.

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

SIGNED CHRIS PENNELLS TITLE DRILLING COORDINATOR DATE 5/4/83

APPROVED BY _____ TITLE Original Signed By
Leslie A. Clements
Supervisor District II DATE MAY 09 1983

CONDITIONS OF APPROVAL, IF ANY: