STATE OF NEW MEXICO			
ENERGY AND MINERALS DEPARTMENT			
NO. OF COMIES RECEIVED		TION DIVISION	
DISTRIBUTION	Р. О. ВО	K 208 RECEIVED BY	Form C-103 Revised 10-1-78
SANTA FE	SANTA FE, NEW	MEXICO 87501	Netised 10-1-70
FILE VV	·	JUL 21 1986	5a. Indicate Type of Lease
U.\$.G.\$,			State X Fee
LAND OFFICE		O . C. D.	5. State Oll & Gas Lease No.
OPERATOR		ARTESIA, OFFICE	LG-5246
SUNDRY NO IDO NOT USE THIS FORM FOR PROPOSAL USE "APPLICATION FO	<i>11111111111111</i> 2		
1.	7. Unit Agreement Name		
OIL X GAB WELL O)THER-		
2. Name of Operator	8. Farm or Lease Name		
Roy Collins Drilling	Frank "P" State		
3. Address of Operator	9. Well No.		
Route 4, Box 501-CC,	1		
4. Location of Well	10. Field and Pool, or Wildcat		
UNIT LETTER P 3	30 FEET FROM THE South	LINE AND 330 FEET	Und. Diablo San Andres
THE East LINE, SECTION	21 TOWNSHIP 105	RANGE 27E N	MPM. (() () () () () () () () () () () () ()
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
	3853 GL		Chaves ())))))
16. Check App	ropriate Box To Indicate N	lature of Notice, Report or	Other Data
NOTICE OF INTE	ENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER Acidizing	
OTHER	· · · · · · · · · · · · · · · · · · ·		
	······································		
17 Describe Proposed or Completed Operati	one (Clearly state all nestiment day	alla and size massimes deservices.	dian and and days of south and the state

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

On July 6, 1986, we set 5 1/2" tension packer on tubing at 1993' to acidize well. On July 7, acidized with 5000 gallons 20% acid and 28 ball sealers. I.S.D.P. 1900 and final shut-in pressure 1600 lbs. Well flowed back 60 barrels of acid water. On July 8, swabbed tubing approximately 70 barrels of acid water and put back on pump.

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

AIGHER Speer A Collini		TITLE CROMES	DATE 7-17-86
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	Original Signed By Les A. Clements Supervisor District II	TITLE	SEP 30 1986