Submit 3 Copies to Appropriate

APPROVED BY ---

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

_ DATE --

District Office	•
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION D P.O. Box 2088 RE	CEIVED 30-005-62661
DISTRICT II P.O. Drawer DD, Anesia, NM 88210 Santa Fe, New Mexico 8750	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brizzos Rd., Aztec, NM 87410	B 03'89 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, BY	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name of Omit Agreement Name
1. Type of Well: OIL X WELL OTHER	O'Brien "C"
2 Name of Operator Stevens Operating Corporation	8. Well No. 9
3. Address of Operator	9. Pool name or Wildcat
P.O. Box 2408 Roswell, New Mexico 88201	Twin Lakes Devonian
4. Well Location Unit Letter _ E : _ 1870 Feet From The _ North North North North North _ N	Line and 80 Feet From The West Line
Section 1 Township 9S Range	28E NMPM Chaves County
10. Elevation (Show whether DF, RK 3934.4	
11. Check Appropriate Box to Indicate Natur	e of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REM	EDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS CON	IMENCE DRILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CAS	ING TEST AND CEMENT JOB
OTHER: OTH	ER: Completion X
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pwork) SEE RULE 1103.	vertinent dates, including estimated date of starting any proposed
26 1/2, 27 1/2, 28, 33 1/2 40 1/2, 44 1/2, 45, 45 1/2 4.7# TBG w/5 1/2" Baker Loc	15, 16, 21 1/2, 22, 23, 25, 25 1/2, 34, 34 1/2, 37 1/2, 38, 39, 40, 25 shots, .38". Ran 226 JTS of 2 3/8" ckset PKR @ 7450'. Spot 3 BBL acid Set 5 1/2" Lockset PKR @ 7099', 112'
January 31, 1989 Acidized well w/5000 gal of 15% MSR 100, using 40 NCB.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	20/00/00
SKONATURE	General Manager DATE 02/02/89
туреод PRINT NAME Patricia Thompson Greenwade	TELEPHONE NO. 622 – 7273
(This space for State Use) Original Signed By Mike Williams	FEB 2 8 1989