	· · ·				<u> </u>
ubmit 3 Copies) Appropriate)istrict Office	State of New Mex Energy, Minerals and Natural Res	tico sources Department		Form C-103 Revised 1-1-89	clar
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-005-62720		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 8	5. Indicate Type of Lease STATE X FEE			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Leas LG-4915	e No.	
(DO NOT USE THIS FORM FOR PR	ICES AND REPORTS ON WELL OPOSALS TO DRILL OR TO DEEPEN (RVOIR, USE "APPLICATION FOR PER -101) FOR SUCH PROPOSALS.)	UH PLUG BAUK IU A	7. Lease Name or Unit	Agreement Name	
1. Type of Well: OL GAS WELL X WELL	OTHER		Runyan State	Unit	
2. Name of Operator			8. Well No. 2		
ELK OIL COMPANY 3. Address of Operator			9. Pool name or Wildca		
Post Office Box 310, Roswell, New Mexico 88202-0310			Wildcat San Andres		
4. Well Location		Line and 1	980 Feet From The	West	Line
0.0	Township 8 South Rad	nge 27 East	NMPM CI	haves Co	unty
Section 30	10. Elevation (Show whether I	DF, RKB, RT, GR, etc.)			
		968' GR	enort or Other Da	//////////////////////////////////////	
II. Check NOTICE OF IN	Appropriate Box to Indicate N TENTION TO:		BSEQUENT REP	PORT OF:	
		REMEDIAL WORK		ERING CASING	
	CHANGE PLANS			JG AND ABANDONME	INT 🛄
PULL OR ALTER CASING					— 1
OTHER:		OTHER:			
	rations (Clearly state all pertinent details, an	nd eive pertirunt dates, incl	uding estimated date of stat	ning any proposed	
 Describe Proposed or Completed Ope work) SEE RULE 1103. 					
Propose to plug and abandon well as follows: (1) Set CIBP at 1850' with 35' cement.				CEIVED	
	$1500!$ of $4\frac{1}{2}$	[†] casina.	nor Tag.	- 4028	١
(2) Cut and recover 1500 0/ 42 calling. (3) Set 100' plug, 50 in / 50 out casing stub at 1500'. (4) Set 100' plug, 50 in / 50 out 8 5/8" shoe at $351'$.				$T = 2^{1950}$	
(4) (5) (5) (5)	0 sxs surface.			ON DI	
			OIL	CON. DI	-
				DIST 2	
		No	Hy N.M.O.C.C. In	sufficient time to	Witness
	beiween plucs.				
I hereby certify that the information above is	true and complete to the best of my knowledge and	t belief.		10/01/	06
	>~	President		DATE	30
	7			TELEPHONE NO. (505	<u>)623-</u> 319
TYPE OR PRINT NAME JOSEPH	h J. Kelly				
(This space for State Use) ORIGINAL 9	Igned by Tim W. Gum			OCT 151	996
APPROVED BYDISTRICT I	<u> 33968¥808</u> π	TLE		_ DATE	
CONDITIONS OF APPROVAL, IF ANY:					

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