Submit 3 Coples to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 65 Revised 1-1-89	C
W I	J

DISTRICT I	11-khe	им	88240
T () Box 1980.	Hobbs,	MM	90Z3V

OIL CONSERVATION DEVISION P.O. Box 2088

VELL API NO.	
30-005-62734	
5. Indicate Type of Leane STATE	FEE 🔀
and the Arma Laise No.	•

P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088	1 0000	30-005-62/34
DISTRICT II P.O. Drawer DD, Artesis, NM 88210	Santa Fe, New Mexico 8	7504-2088 2 90	5. Indicate Type of Leare STATE FEE X
•			6. State Oil & Gan Leane No.
DISTRICT III 11710 Rio Brazol Rd., Aztec, NM 87410		O, C. D.	
		C AGRESIA, OFFICE	
DO NOT USE THIS TOTAL PEOPPING	S AND REPORTS ON WELL SALS TO DRILL OR TO DEEPEN C R. USE "APPLICATION FOR PERI	PA PLUG BACK TO A	7. Leane Name or Unit Agreement Name
DIFFERENT HESENVOI	FOR SUCH PROPOSALS.)		
			Mesquite TAnk
1. Type of Well: Oil. Well: Well Well	OTHER		
W12L [2]			8. Well No.
2. Name of Operator	lling Inc		9. Pool name or Wildcat
Fred Pool Dri 3. Address of Operator			N
D. O. Box 1393.	Roswell, N.M. 88	201	WC Devonian
1. Well Location			a the town the Wast Une
Unit Letter M: 660	Fed From The South	Line and 6 b	O Fed From The West Une
Unit Detter			NMIM Chaves
Section 29	Township 11S Ran 10. Elevation (Show whether I	SF, RKB, RT, GR, etc.)	NNIM CITATION OF THE PARTY OF T
X/////////////////////////////////////	3729 Gr		and or Other Data
Check An	propriate Box to Indicate N	lature of Notice, R	eport, or Other Dam
NOTICE OF INTE	NITION TO:	SUE	SSEQUENT REPORT OF:
NOTICE OF INTE	· · · · · · · · · · · · · · · · · · ·		ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	, ,
t-1		COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT L
TEMPORARILY ABANDON	CHANGE PLANS		
PULL OR ALTER CASING	•	CASING TEST AND C	EMENI TOR ()
PULL ON ACTEN CASING	-	1 .	8

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

OTHER: completion

March 19, 1990

Perforations at 7286-7288 with 5 shots. Acidized well with 1000 gallons 15% acid. Swabbed well back and put on pump.

· (A	nation above is true and complete to the best of my	nowledge and belie	<u>Vice Pr</u>	esident	DATE 3-27-90	
SIGNATURE	3			505 623-820	2 TELETI IONE NO.	
Type or frint name	Penta Pool					
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT 11	m.e			APR 6 19	90
AMPOVED BY						