to Appropriate District Office	Energy, Minerals and Natural F	Resources Department	Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION P.O. Box 20	NO STATEMON	WELL API NO.
DISTRICT II	Santa Fe, New Mexico		30-005-62763
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		MAR 8 '90	6. State Oil & Gas Lease No.
		O. C. D.	LG-7983
DO NOT USE THIS FORM FOR PRO DIFFERENT RESER	CES AND REPORTS ON WE POSALS TO DRILL OR TO DEEPER VOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS)	N OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Weil: OIL GAS			
WELL WELL X 2. Name of Operator	OTHER		Jan State
ELK OIL COMPANY			8. Well No.
3. Address of Operator			9. Pool name or Wildcat
Post Office Box 310, Rosw	ell, New Mexico 88202-0	310	Und. Foor Ranch Pre-Permian
4. Well Location Unit Letter K: 198	Feet From The South	Line and10	280
2/			reet From The West Line
Section 36	Township 8S R: 10. Elevation (Show whether	ange 26E j	NMPM Chaves County
	3931'	· · · · · · · · · · · · · · · · · · ·	
11. Check A			anort or Other Date
Check Appropriate Box to Indicate Nature of Notice, ReNOTICE OF INTENTION TO:		SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	į.	
TEMPORARILY ABANDON	CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLING	ALTERING CASING
PULL OR ALTER CASING	COMMUNICACE DAILENING		TO THE REAL PORTION OF THE PARTY OF THE PART
	CASING TEST AND CE		MENT JOB (X)
OTHER:		OTHER:	
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	xos (Clearly state all pertinent details, ar	nd give pertinent dates, includ	ing estimated date of starting any proposed
Salt, 3/1 30 minut	TD of 6406' on 3/6/90. Cemented with 400 sxs 0% Halid 4, 2/10% CFF es, held okay. Prep to pe	65/35 Poz Prem: R-3, and 2% Gel. rforate and test.	ium Plus containing 5#
I hereby certify that the information above is true at	nd complete to the best of my knowledge and h	belief.	
	_		

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

SIGNATURE

TITLE

President

DATE

3/7/90

THEPHONE NO.

THEPHONE NO.

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

TITLE

DATE

APPROVED BY

DATE

CONDITIONS OF AITPROVAL, IF ANY