' Submit 3 Copies to Appropriate District Office

Luite of Piew Misses Energy, \* Therals and Natural Resources Department

rorm C-1W Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

**OIL CONSERVATION DIVISION** 

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.		
30-005-62780		
5. Indicate Type of Lease	<u></u>	

	STATE &	FEE
5. State Oil & Gas L	ease No.	

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	MAY 14'90 6. State Oil & Gas Lease No. LG-8581-1	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		
1. Type of Well: OIL GAS WELL X OTHER	Luce State Comm.	
2. Name of Operator	8. Well No.	
ELK OIL COMPANY/	1	
3. Address of Operator Post Office Box 310, Roswell, New Mexico 88202-0310	9. Pool name or Wildcat Und. Foor Ranch Pre-Permian	
4. Well Location		
Unit Letter O: 660 Feet From The South	Line and 2310 Feet From The East Line	
Section 8 Township 9 South Range	27 East NMPM Chaves County	
10. Elevation (Show whether DF, RKE 3866' GR	S, RT, GR, etc.)	
Clark Day to Indicate Material	of Notice Penart or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REME	EDIAL WORK ALTERING CASING	
	MENCE DRILLING OPNS. PLUG AND ABANDONMENT	
	NG TEST AND CEMENT JOB	
OTHER:		
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pertinent details, and give p work) SEE RULE 1103.</li> </ol>	eriment dates, including estimated date of starting any proposed	
Spud well on 5/3/90. Drilled 12¼" hole to 1010'. Ran 26 joints (1010') of 8 5/8", 24#, J-55 Casing. Cemented with 375 sxs Halliburton Lite containing ¼# flocele, 2% CaCl2. Tailed by 200 sxs Class C containing 2% CaCl2. Circulated 25 sxs. WOC 18 hours. Tested to 1000# for 30 minutes, test okay. Resume drilling a 7 7/8" hole.		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	President 5/10/90	
SIGNATURE SCEPT THE	President DATE 5/10/90	
TYPE OR PRINT NAME Joseph J. Kelly	TELEPHONE NO.	
(Thus space for State Use)  ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IS	MAY 1 8 1990	
SUPERVISOR, DISTRICT IF	DATE DATE	

APPROVED BY -