Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form Revis

n C-103	-015
sed 1-1-89	0

DISTRICTI OIL CONSERVATIO		WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 20		30-005-62964
DISTRICT II Santa Fe, New Mexico P.O. Drawer DD, Artesia, NM 88210	8/304-2088	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		6. State Oil & Gas Lease No. VB-0110
THE THE PROPERTY ON WE	110	
SUNDRY NOTICES AND REPORTS ON WE (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PE (FORM C-101) FOR SUCH PROPOSALS.)	OH PLUG BACK TO A	7. Lease Name or Unit Agreement Name
	RECEIVED	1
1. Type of Well: OIL GAS WELL OTHER	11 0 400°	Celtic State
2. Name of Operator	1914 o 0 1930	8. Well No.
ELK OIL COMPANY	<u> </u>	3
3. Address of Operator	Market Table	
Post Office Box 310, Roswell, New Mexico 8820	2-0310	Southeast Acme San Andres
4. Well Location		
Unit Letter D: 330 Feet From The North	Line and3	30 Feet From The West Line
Section 13 Township 8 South R		NMPM Chaves County
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		<i>\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
	'GR	anost or Other Data
11. Check Appropriate Box to Indicate	Nature of Notice, R	POSCUENT REPORT OF
NOTICE OF INTENTION TO:	SUB	SEQUENT REPORT OF:
PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WOULD	COMMENCE DRILLING	
TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING	CASING TEST AND C	EMENT JOB X
OTHER:	OTHER:	·
		"
 Describe Proposed or Completed Operations (Clearly state all pertinent details, work) SEE RULE 1103. 	and give periinent dales, incli	aing estimatea acite of starting any proposed
Spud well at 5:30 A.M. on 06 (11 joints), of 8 5/8", 24# Casin Plus containing 2% CaCl2. Plu 100 sxs. WOC 18 hours. Text Resume drilling a 7 7/8" hole.	g. Cemented with g down at 4:00 P	h 300 sxs Class C Premium P.M. 06/25/93. Circulated
	and healing	
I hereby certify that the information above is true and complete to the best of my knowledge a	eu odle.	0/ /20/02
	mız <u>President</u>	DATE06/29/93
Joseph J. Kelly		ты енноме NO. (505)623-3

TYPE OR PRINT NAME - DATE 1-23-93 (This space for State Use) - TITLE -APPROVED BY-

CONDITIONS OF APPROVAL, IF ANY: