Submit 3 Copies to Appropriate District Office

State of New Mexico Energy .inerals and Natural Resources Department

Form C	-103	C	15
Revised	1-1-8	9	1),
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WELL API NO.

DISTRICT P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088

30-005-63047 Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease DISTRICT III STATE FEE 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. V-2982 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: WELL WELL OTHER Bill Thorp State 2. Name of Operator 8. Well No. Collins Oil & Gas Corporation 9 3. Address of Operator 9. Pool name or Wildcan P. O. Box 2443, Roswell, NM 88202 Acme; San Andres, Southeast Well Location Unit Letter __M 660 Feet From The South Line and 990 _ Feet From The West Section Township Range 27E NMPM Chaves County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3923 GL Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB | X OTHER: OTHER:_

- 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.
 - 4-5-95 Spudded hole at 7:00 a.m. with United Drilling rig #
 - 4-6-95 Ran 428' of 8-5/8", 24 lb. casing with insert float \mathbf{k} Guide shoe. Pumped 240 sxs. of Člass "C" cement with 25 sxs. of mud with 2% CaCl. Approximately 110 sxs. of cement to pits. APR 1 2 1995
 - 4-7-95 Drying time on cement was aprrox. 18 hrs. Pressure tested casing to 650 lbs. no droppage of pressure in 30 minutes. & shoe, no water.

DIST. 2

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	Rey Il Collins)/G	DATE 4-10-95	
TYPE OR PRINT NAME	ROY D. COLLINS	TELEPHONE NO. 623-2040	
(This space for State Use)	ORIGINAL SICHED RY TIM W. GUM		
AITROVED BY	TAST DOT THE SERVER THE	APR 1 3 1995	