Subject 3 Copies to 22 propriete District Office

, use of New Mexico Lnerg. Minerals and Natural Resources Department

Form C-103

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

CONDITIONS OF AFFROVAL, IF ANY:

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe. New Mexico. 87504-2088

30-005-63071

WELL API NO.

DISTRICTLI			
P.O. Drawer DD, Artesia, NM 8821	۱0 ٍ	di	

P.O. Drawer DD, An	tesia, NM 88210	् Santa Fe, New Me	XICO	87504-2088	5. Indicate Ty	ype of Lease STATE X	FEE
DISTRICT III 1000 Rio Brazos Rd.	51 · 1 1 1 46 1 1 1	X - Z			6. State Oil &	g Gas Lease No.	
(DO NOT USE TH	HIS FORM FOR PROPOS DIFFERENT RESERVOIR	AND REPORTS ON ALS TO DRILL OR TO DE . USE "APPLICATION FO FOR SUCH PROPOSALS.	EPEN R PEF	OR PLUG BACK TO A	7. Lease Nam	ne or Unit Agreement Nam	//////////////////////////////////////
1. Type of Well:	GAS] _	1	
WELL X 2. Name of Operator	WELL	OTHER			8. Well No.	onderosa	
	anson Operati	ng Company, I	nc.			#2	
3. Address of Opera P	.0. Box 1515,	Roswell, NM	88	202-1515	9. Pool name SE A	or Wildcat cme San Andr	es
4. Well Location Unit Letter	G : 1650 F	eet From The North	1	Line and165	O Feet 1	From TheEast	Line
	2.2	Cownship 8S	Rai	275	NMPM	Chaves	County
Section		Ownsup	helher l	DF, RKB, RT, GR, etc.) 33 GR	MATERI		
11.	Check Appr	opriate Box to India	ate N	Nature of Notice, R	eport, or Ot	her Data	
NO	OTICE OF INTENT	TION TO:		SUB	SEQUENT	REPORT OF:	
PERFORM REMEDI	AL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASIN	G 🗌
TEMPORARILY ABA	ANDON	CHANGE PLANS	П	COMMENCE DRILLING	OPNS.	PLUG AND ABANI	DONMENT X
PULL OR ALTER CA			_	CASING TEST AND CE	_]	
	-0.110		\Box	OTHER:		-	
OTHER:							
12. Describe Propose work) SEE RUL							
2-22-01	and lay down tubing.	casing equipm rods and ins	sta]	1 BOP and pu	ıll out	of hole with	1
2-23-01	<pre>w/brine gel Pull tubing tubing to 57</pre>	r/CIBP 5 1/2" 9.5# mud and to 1045' and '9' spotted 25	spo spo ss 5	otted 6 sxs of otted 25 sxs. cs cement.	cement o Tagged	n top of CII at 823' pul	3P.
2-26-01	circulated o	327', pull to cement 15 sxs l installed do	to	surface, dug	g out ce	llar and cut	t off
					.77		
I hereby certify that the	e information above is true and or					2 6 4	2.1
SIONATURE	Jelsy - per		T III	Prod. Anal	Lyst	DATE 3-6-(505-622-73	
TYPE OR PRINT NAME	Betsy Spe	en				TELEPHONE NO.	
(This space for State U	isc)					,	
APPROVED BY	hil Howker	<u>ٺ</u>	m	. Field Rays	$\mathcal{Z}_{}$	DATE 8/6	/200/_