Submit 3 Copies

## State of New Mexico

Form C-103

to Appropriate District Office	Revailed 1-1-00
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088	WELL API NO. 30-005-63090
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease  STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. LG07983
SUNDRY NOTICES AND REPORTS ON WELLS  ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name
1. Type of Weil: OIL GAS WEIL WEIL X OTHER	Jan State
2. Name of Operator	8. Weii No.
ELK OIL COMPANY	9. Pool name or Wildcat
3. Address of Operator Post Office Box 310, Roswell, New Mexico 88202-0310	Foor Ranch Pre Permian
4. Well Location	Til 4
Unit Letter C: 990 Feet From The North Line and 213	30 Feet From The West Line
	NMPM Chaves County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
//////////////////////////////////////	
Check Appropriate Box to Indicate Nature of Notice, R NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	
PULL OR ALTER CASING CASING TEST AND CE	EMENT JOB 🔼
OTHER: OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incluwork) SEE RULE 1103.  Spud well on 8/2/96. Drilled 12½" hole (1037.12') of 8 5/8", 24#, J-55 casing. Halliburton Lite Premium Plus containing and 5# gilsonite; tailed in with 200 sxs 1.6% CaCl2. Circulated 75 sxs. WOC 1 for 30 minutes, test okay. Resume drilling	to 1040'. Ran 24 joints Cemented with 450 sxs ng ¼# flocele, 2% CaCl2 Premium Plus containing 8 hours. Tested to 1000# a 7 7/8" hole.
	RECEIVED.  AUG 0 6 1996
	oil con. Div.
I hereby certify that the information above is trib and complete to the best of my knowledge and belief.  President	DISTI - 4 8/5/96
SIGNATURE TITLE President	DATE
/ / - ( - /	TELEPHONE NO. $(505)623-31$

(This space for State Use)

original signed by tim W. Gum District II Supervisor

AUG 1 2 1996 DATE -

CONDITIONS OF APPROVAL, IF ANY: