	, -		1158	
Submit 3 Copies To Appropriate District	State of New M	avias	J. Ho	/
Office District I	Energy, Minerals and Nat			Form C-103 Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		WELL API NO. 30-005-6338	,
811 South First, Artesia, NM 87210  District III			5. Indicate Type of	of Lease
1000 Rio Brazos Rd., Aztec, NM 87410  District IV	Santa Fe. NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505	ES AND REPORTS ON WELL	6.26.20.5	VA 2401 000	0
DIFFERENT RESERVOIR. USE "APPLICA PROPOSALS.)	ALS TO DRILL OR TO DEEPEN ON IN	HC DACK TO	7. Lease Name or	Unit Agreement Name:
1. Type of Well: Oil Well  Gas Well	Other	11/2 200 S	ouise Yates	Ctata #2
2. Name of Operator Jalapeno Corporation	/	RECEIVESIA CO	D *** ** *	state #2
3. Address of Operator		JCD ATT	9. Pool name or V	Vildcat
P.O. Box 1608, Albuquer 4. Well Location	que, NM 87103-1608		Wolf Lake Sa	n ANdres
Unit Letter K : 1	650 feet from the FSL	line and23	10 foot 6	
Section 7				n the <u>FWI</u> line
	10. Elevation (Show whether D 3892 GLE	ange 28-E PR, RKB, RT, GR, etc.	NMPM Chaves	County
11. Check Ap	propriate Box to Indicate N	ature of Notice I	Report or Other I	)ata
NOTICE OF INT	ENTION TO:	SUBS	SEQUENT REF	PORT OF:
		REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON			LING OPNS.	PLUG AND ABANDONMENT
	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOB	D 🗆	
OTHER: Production Casing	· <b>· · · · ·</b>	OTHER: Produc	ction Casing	<b>₩</b>
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.				
Drilled with 7 7/8" b	oit to 2437' (KB 8ft)	. Ran deviatio	on survey. Ra	in 2430 ft. of
5 1/2" 15.5 lb production casing plus Halliburton shoe. Cemented with 190 sacks class C Premium Plus 50/50 Poz cement.				
WOC	50750 TOZ CEMETE.			
I haraby partify the the inferrior				-
I hereby certify that the information of	sove is true and complete to the	best of my knowledge	e and belief.	
SIGNATURE THINK ?	1	President	···	_DATE
Type or print name Harvey E. (This space for State use)	Yates, Jr. on Jalage	ũo Conp	Teleph	one No. (505) 242-2050
APPPROVED BY For Recen	1744			ijii ar ong
Conditions of approval, if any:	3			DATE JUL 0 5 2001
No	TOC			