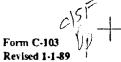
Submit 3 Copies

## State of New Mexico



JUL 1 6 1990

to Appropriate District Office Energy, Minerals and Natural Resources Department DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 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. LG-6578-2 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: Ramsey 25 State Unit WELL X WELL. OTHER Name of Operator 8. Well No. Arthur B. Ramsey 3. Address of Operator 9. Pool name or Wildcat Wild Cat, Majado P.O. Box 11369 Albuquerque, N.M. 87192 Well Location South 330 East Unit Letter Feet From The Feet From The 27-South Eidalgo Township Section County 10. Elevation (Show whether DI, RKB, RT, GR, etc.) 4,528 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 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 ABANDONMEN CASING TEST AND CEMENT JOB PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed Spudded 7/1/90, 6:40PM, drilled 12; hole to 618 feet, ram 598.8 feet of 8 5/8" casing Cemented W/400 sax Class Neat, circulated 50 sax cement to pits. Plug down @ 9:45PM 7/4/90. WOC 20 hours, tested casing 1000# f/30 min, held OK. RECEIVED JUL 10'90  $C_{+}\subseteq D_{+}$ ARTESIA OFFICE H-154. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 7-7-90 SIGNATURE -DATE . 505 299-6048 Arthur B. Ramsey TYPE OR PRINT NAME

CONDITIONS OF AFFROVAL, IF ANY:

OFFICINAL SIGNED BY

WALE SHILL AND

(This space for State Use)