		_			2216V	
Submit 3 Copies To Appropriate District State of New			f New Me	exico	DIS OF	Form C-103
Office District I Energy, Minerals an						Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240					WELL API NO. 30-015-32329	
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION					5. Indicate Type of	of Lease
District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 South Pacheco South Pacheco					STATE -	FEE
District IV Santa Fe, INIVI 8/303					State Oil & Gas L	
2040 South Pacheco, Santa Fe, NM 87505						NA
DIFFERENT RESE	IS FORM FOR PROPOS	CES AND REPORTS SALS TO DRILL OR TO DI CATION FOR PERMIT" (FO	EEPEN OR PLU	JG BACK TO A	1	or Unit Agreement
PROPOSALS.) 1. Type of Wel	l:		/ V*	\$ 1	Kodiak State	e
Oil Well [Gas Well	Other	\(\frac{\theta}{\gamma}\)		Kodiak State	
2. Name of O			1	OCD RECEIVED	7.7 Well No.	•
	issman Permian,	L.L.C.	\\\	OCD ARTED		<u>1</u>
3. Address of	•	Midland Toyon 76	2701	ARTESIA	% Pool name or sand Tank (Morro	
4. Well Local	1011		`	\$5297475625		
Unit Le	etter <u>N</u> :	660' feet from the	e <u>Sout</u>	h line and 6	60' feet from	the <u>East</u> line
Section	n 36	Township) 17-S	Range 29-E	NMPM	Eddy County
Section	1 30	10. Elevation (Show				Eddy County
		3546' GL 356	63' KB			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
					SEQUENT RE	
PERFORM REI	MEDIAL WORK	PLUG AND ABANDO		REMEDIAL WOR	ж Ц	ALTERING CASING
TEMPORARILY ABANDON					COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTE	R CASING L	MULTIPLE COMPLETION		CASING TEST AI CEMENT JOB	ND ■	
OTHER:				OTHER:		
	any proposed work)					including estimated date of proposed completion
7/03/02.	TD intermediate	hole at 3,995' at 15:15	РМ '. ТОН	•		
7/04/02 PU and run 90 jts of 32# 8-5/8" J-55 to TD. MIRU Schlumberger and cmt csg w\ 435 sxs. circ. 160 sxs. Plug down at 1:00 PM. Cut off csg and weld on csg head at 3:00 PM. tested to 1500 psi.						
7/05/02	NU BOP. WOC. drilling operation	•	i. Tested-Ol	ζ. TIH w\ 7-7/4" b	it drilled out 89' of a	cmt inside csg. resumed
		NOC 2				
I hereby certify	that the information	above is true and com	plete to the	best of my knowled	ige and belief.	
SIGNATURE_	9/2m 8, m	Chealy	TITLE _	Operations	Engineer 1	DATE 7/10/02
Type or print na	ame Kem E. N	1cCready			Telephone No.	915-682-4429
(This space for	and the	DRIGINAL SIGNED	BY TIM W	Q1189		19 2002
APPPROVED		DISTRICT II SUPER	VISOR _{ILE}	80 63	•	DATE
Conditions of a						