

			161	
Submit 3 Copies	State of New N	lexico	Form C·103	
to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATI		WELL API NO.	
DISTRICT II	P.O. Box 20		. ,	
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. V-2293	
CUMPRY MOTI	CEC AND DEPORTS ON WI	मा ८ जाइ है		
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	
I. Type of Well:		1111 50	1	
MET X MET OUT	OTHER	J01.	Marbob State	
2. Name of Operator		U. OFFICE	8. Well No.	
Read & Stevens,	Inc.	ARTESHA, OFFICE	1 .	
3. Address of Operator			9. Pool pagne or/Wildcat	
P.O. Box 1518, Ro	oswell, NM 88202		Faimir Bone Spring	
4. Well Location				
Unit Letter A: 660	Feet From The North	Line and660	Feet From The <u>East</u> Line	
Section 19			NMPM Eddy County	
	10. Elevation (Show whether	er DF, RKB, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INT			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING	_	CASING TEST AND CE		
OTHER:		OTHER: Perf Bor	ne Spring sand & frac.	
 Describe Proposed or Completed Operat work) SEE RULE 1103. 	ions (Clearly state all pertinent details,	and give pertinent dates, inclu	ding estimated date of starting any proposed	
cmt. DOC a w/190,000#	neeze cmt existing Bor and perf the Bone Spri 20/40 sd and 90,000# to production.	ing sand 82849	9021 w/30 holes. Frac	

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I hereby certify that the information above is true and complete to the best of my known skinnature TYPE OR PRINT NAME	wtodge and belief. TITLE Petroleum Engineer	DATE 6-19-90 TELEPHONE NO.
(This space for State Use) OR&GINAL SIGNED BY MIKE WILLIAMS APPROVED BY SUPERVISOR, DISTRICT IS CONDITIONS OF APPROVAL, IP ANY:	TITUE	JUL 1 2 1990