

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

054
8

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-23663
5. Indicate Type of Lease Federal <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM 29202
7. Lease Name or Unit Agreement Name Baldrige Federal <i>Com</i>
8. Well No. 2
9. Pool name or Wildcat Baldrige Canyon Morrow (Gas)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4257 KB 4242GD.

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator W. A. Moncrief, Jr.
3. Address of Operator Moncrief Building, Ninth @ Commerce
4. Well Location Fort Worth, Texas 76102 Unit Letter <u>B</u> : <u>196</u> Feet From The <u>N</u> Line and <u>1427</u> Feet From The <u>E</u> Line Section <u>14</u> Township <u>24</u> Range <u>24E</u> NMPM <u>Eddy</u> County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Perforate Different Zone</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Set CIBP @ 10,600. Squeeze Perfs at 10,403-410'. Perforate for production at 10,500-504'. Acidize and swab test well.

Wrong Form

RECEIVED
JAN 13 1996
OIL CON. DIV.
EXT. 2

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Patsy Holcomb TITLE AGENT DATE 1/10/96
TYPE OR PRINT NAME Patsy Holcomb TELEPHONE NO. 817 336-7232

(This space for State Use)

APPROVED BY Record Only TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

