Submit 3 Copies To Appropriate District Office	State of N	Form C-10	3		
District I	Energy, Minerals and Natural Resources			Revised March 25, 1999) ——
District II				WELL API NO. 30-025-08333	
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION District III 2040 South Pacheco				5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 2040 South Pacheco Santa Fe, NM 87505			STATE XX FEE		
2040 South Pacheco, Santa Fe, NM 87505				6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unti Agreement Nar	me
(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				3	
PROPOSALS.)				KEMNITZ WOLFCAMP UNIT	
1. Type of Well: Oil Well					
Oil Well X Gas Well Other 2. Name of Operator				0 11/11/1	
MGM OIL & GAS COMPANY				8. Well No. 18	
3. Address of Operator P.O. BOX 891, MIDLAND, TEXAS 79702-0891				9. Pool name or Wildcat KEMNITZ; LOWER WOLFCAMP	
4. Well Location				REMITE, ESSENCE WOLLOW	
Unit Letter A .	660 feet from the		line and	660 feet from the	ine
Section 25	Township	169 Ra	nge 33E	NMPM LEA County	
Section 25 Township 16S Range 33E 10. Elevation (Show whether DR, RKB, RT, GR, etc.)				County	
			·		
11. Check A	ppropriate Box to In	dicate Na	ture of Notice,	Report or Other Data	
NOTICE OF IN	TENTION TO:		SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK		ν 🗀 . !	REMEDIAL WOR	RK ALTERING CASING	G 🗀
TEMPORARILY ABANDON	COMMENCE DIVIDE				
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOBS	ABANDONMENT D	
OTHER: REPLACE OLD FLOW			OTHER:		
		toto all mare			
of starting and proposed work	SEE RULE 1103 For	Multiple C	unem detans, and g	give pertinent dates, including estimated a diagram of proposed completion	date
or recompletion.	1100, 1 01	unupic C	ompicuons. Attaci	i diagram of proposed completion	
PPDIAGE OF THE					
REBLACE OLD STEEL FLO	V LINE WITH POLY	LINE			
				AE 16 77	
				731210171870	
				To the state of th	
				AFR COL	
				(S) 6. (20) (23)	
				In The VED W	
				Hobbs OCD	
				(e)	
				128 29 30 31	
I hereby certify that the informatio	n above is true and com	plete to the	best of my knowle	dge and belief	
SIGNATURE AND TO	Taren 1	TITLE		DATE	
Type or print name GREG (MZ	AUZY			432-682-7714	
(This space for State use)	/ \ \			Telephone No. () -	
APPROVED BY	1,1,1	m			
Conditions of approval, if any:	J. WWW.	TITLE_	ESENTATIVE II/ST	TAFF MANAGER DEC 2 2 2004	
	OC F	HELD REPR	EDENIMINATION	DEL 2 2 2004	