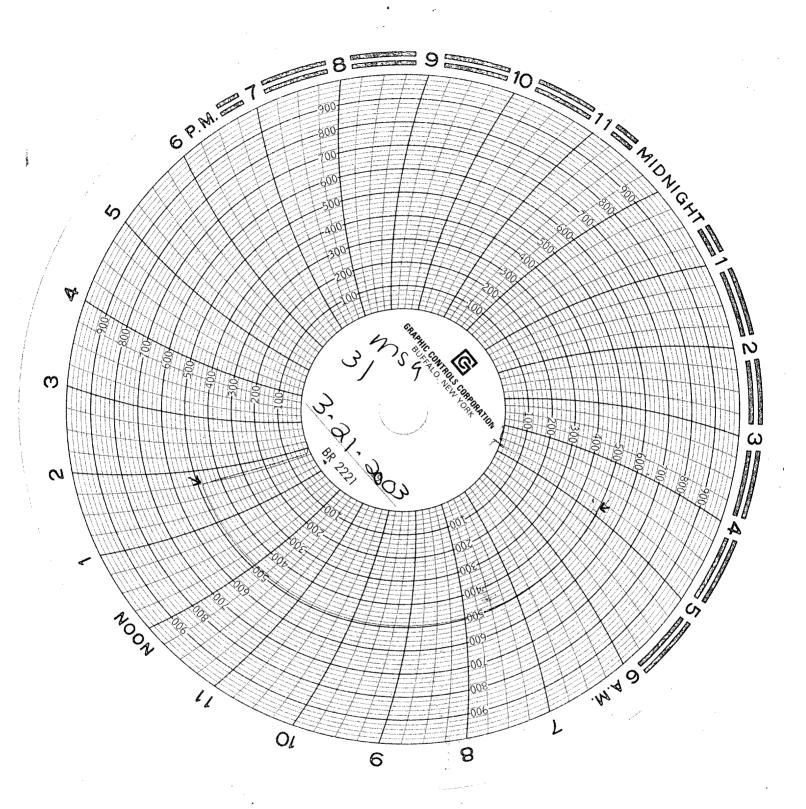
xSubmit 3 Copies To Appropriate District Office	State of New M	exico		Form C-103
District I	Energy, Minerals and Nat	ural Resources	r	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO.		
811 South First, Artesia, NM 88210			30-041-00141 5. Indicate Type	ofloss
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pacheco			
District IV	Conto Lo NIM 074114		STATE [	FEE X Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505			o. State Off & C	Jas Lease No.
	ES AND REPORTS ON WELL	_	7. Lease Name o	r Unit Agreement Name:
(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			MILNES	SAND UNIT
PROPOSALS.)	TION FOR PERMIT (FORM C-101) F	OKSUCH		
1. Type of Well:	_			
Oil Well Gas Well	Other INJECTION			
2. Name of Operator J. CLEO THOMPSON			8. Well No.	31
3. Address of Operator			Q Pool non	ne or Wildcat
325 N. ST. PAUL, SUITE 4300, DALLAS, TX 75201				AND (SAN ANDRES)
			1111111111	ind (or a variable b)
4. Well Location				
I Init I otton I . 1006 6	that from the COLUMN 1500	1 ((0)	d trenden	
Omi LetterL:_ 1986i	eet from the _SOUTH line	and _660feet fro	m theWEST	line
Section NW SW 18	Township 8S Range	e 35E 1	NMPM (	County R00SEVELT
	10. Elevation (Show whether D			County 100 OBE VIDE1
	4235' GR			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT RE				PORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS. 🔲	PLUG AND
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN		ABANDONMENT
	COMPLETION	CEMENT JOB		
OTHER		OTHER: MIT FO	R OCD	X
12. Describe proposed or completed	operations. (Clearly state all pe			
of starting any proposed work). S	SEE RULE 1103. For Multiple	Completions: Attach	wellbore diagram	of proposed completion
or recompilation.	WELL DOWN BELEASED O	N OFF TOOL BOOK	T	
<ol> <li>RU BASIC, BLED WELL DOWN, RELEASED ON-OFF TOOL, POOH.</li> <li>RIH WITH ON-OFF TOOL, USED WEIGHT OF COLLARS TO MAKE PACKER HOLD.</li> </ol>				
3.) POOH, LAYED COLLARS DOWN, RIH & LATCHED ON TO PACKER.				
4.) TESTED CASING TO 500 PSI, RELEASED ON-OFF TOOL.				
5.) CIRCULATE PACKER FLUID, LATCHED ON TO PACKER & PERFORMED MIT FOR OCD.				
	·			
I hereby certify that the information a	hove is true and complete to the	hest of my knowledg	e and haliaf	
a marcos, comm, and the grommanon a	1/	best of my knowledg	e and bener.	203031-72
SIGNATURE John	Justos TITLE	FOREMAN	DATE	APRIL 23, 2003
Type or print name JOHN HU	GHES	Telep	hone No. (43/2)63	
(This space for State use)				
APPPROVED BY	(1), b TITLE		CTAFE MARIAGI	- A
Conditions of approval, if any	OC FIELD	REPRESENTATIVE !	USTAFF MANAGI	-DALE DA SE FOOD ET
				€0> . a\*\*\*
				CS 21 81 VI 6/2/2



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