Submit 3 Copies To Appropriate District Office	State of New Mexico		₹. Sy.	Form C-103
District I	Energy, Minerals and Natural Resources		WELL ABLAIC	Revised May 08, 2003
1625 N. French Dr., Hobbs, NM 88240 District II			WELL API NO. 30-025-20016	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X	FEE
District IV	Santa Fe, NM 87	7505	6. State Oil & Gas Lo	ease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	·		B-1258-	1
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or 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			New Mexico "AE" State	
PROPOSALS.) 1. Type of Well:			8. Well Number	
Oil Well A Gas Well Other			4	
2. Name of Operator			9. OGRID Number	
Bisco, Inc.			125723	
3. Address of Operator c/o 0il Reports & Gas	Services, Inc., 1008 W	• Broadway	10. Pool name or Will Vacuum; Abo	
4. Well Location Hobbs, NM 88240				
Unit Letter F : 2310 feet from the North line and 2230 feet from the West line				
			ieet nom the	me
Section 12		ange 34E		unty
11. Elevation(Show whether DR, RKB, RT, GR, etc.) 3991 GR				
12. Check A	ppropriate Box to Indicate N	ature of Notice.	Report or Other Dat	a
NOTICE OF IN			SEQUENT REPO	
PERFORM REMEDIAL WORKX	PLUG AND ABANDON	REMEDIAL WOR		ERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI		JG AND
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AN CEMENT JOB	4D	
OTHER:		OTHER:		
13. Describe proposed or com	pleted operations. (Clearly state a	Il pertinent details,	and give pertinent dates.	including estimated date
of starting any proposed wo or recompletion.	rk). SEE RULE 1103. For Multip	le Completions: At	tach wellbore diagram o	f proposed completion
D1.		6 1		
PI	n to run tbg, rods & p	ump & place o	n production.	
			020212	223243
			18 NS	553
			(2. F)	CL 1829304
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			4 4/6	29
			10 Km	Hopps O
			13	, 00° (%)
			10,	14/
			on production.	3450
I hereby certify that the information a	above is true and complete to the bo	est of my knowledge	e and belief.	
SIGNATURE Day	Heard TITLE	Agent	DA	TE 5/19/03
	e Hēard		Telephone 1	No. 508/3931-2707
(This space for State use)				
APPPROVED BY	V. Wind TITLE	VELVERALWING		
Conditions of approval, if any:	TITLE_		DA	1 E
J				