Office Office		ew Mexic			Form C-103
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals ar	nd Natural	Resources	WELL API NO.	Revised March 25, 1999
District II	OIL CONSERVA	ATION D	IVISION		30-025-36087
811 South First, Artesia, NM 87210 District III		th Pacheco		5. Indicate Type o	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe,	NM 8750	5	STATE 26. State Oil & G	
2040 South Pacheco, Santa Fe, NM 87505				o. State On & G	as Dease 110.
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI PROPOSALS.) 1. Type of Well: Oil Well Gas Well		PEN OR PLU	JG BACK TO A	7. Lease Name or Madera "36" Stat	Unti Agreement Name e
2. Name of Operator Pure Resources, L. P.				8. Well No. 1	
3. Address of Operator 500 W. Illinois				9. Pool name or Wildcat	
Midland, Texas 79701 4. Well Location				Wildcat (Morrow)	
Unit Letter A	feet from the	North	line and <u>660</u>	feet fror	n the East line
Section 36	Township 26	S Ra	ange 34 E	NMPM	County Lea
	10. Elevation (Show v 3,197'		RKB, RT, GR, etc.)		
	Appropriate Box to Inc	dicate Na			
NOTICE OF II PERFORM REMEDIAL WORK	NTENTION TO: PLUG AND ABANDON	٧ 🗆	SUB REMEDIAL WOR	SEQUENT RE	PORT OF: ALTERING CASING [
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	ILLING OPNS. X	PLUG AND [
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AI CEMENT JOBS	ND X	
OTHER:			OTHER:		
12. Describe proposed or comple of starting and proposed wor or recompletion. Drilling: This well was spud at 6:30 pm or	k). SEE RULE 1103. For 1				
Surface Casing Cement/Test: On 02/26/2003, 22 Jts. 13-3/8", 4 cmt'd @992' w/780 sx 35:65 PO2 12.60)-Lead followed by 350 sx to FC @ 944' w/147 Bbls FW. P 75 deg F, BHCT @ 1000' = 71 d 82 hours prior to test. Tested 13-	Z "C" cmt w/6% Bentonite Class "C" cmt w/2% CaCl D-CIP @ 6am on 2/26/200 eg F, Max BHCT @ 700' =	, 2% CaCl 2 mixed @ 03. Circ 32 =72 deg F.	2, .25PPS Celloflak 26.4 Gal/sk (Yld:1.3 26 sx cmt to pit. TO Est. cmt strength (e mixed @ 10.4 Gal 34, Wt: 14.80)-Tail. C @ surface by circ. time of test is 750	/sk (Yld: 1.92, Wt: Displaced rubber plug Est: BHST @ 1000' =
I hereby certify that the informati	on above is true and comp	lete to the	best of my knowled	lge and belief.	Control Same
SIGNATURE Olando-B	Bolling	TITLE	Regulatory Analyst		DATE 06/20/2003
Type or print name Alan W. Boh	ling			Tele	phone No. (915)498-866
(This space for State use)			, , , , , , , , , , , , , , , , , , ,	E II/STAFF MANAG	ER
APPROVED BY Jam 1	J. 1. 1. 1.	_ Timeer	REPRESENTATIVE	WSIACL IV	DATE
Conditions of approval, if any	· · · · · · · · · · · · · · · · · · ·	OC14 METER	7 14m.	·	— ^{date} jun 2 6 20