Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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. 30-025-00983

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. E-6387

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.)

7. Lease Name or Unit Agreement Name: Midwest State

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: Petroleum Production Mgmt Inc

8. Well No. 1

3. Address of Operator: PO Box 957, Crossroads, N.M. 88114

9. Pool name or Wildcat: Tonahe Permo Penn

4. Well Location
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line

Section 23 Township 10 S Range 33 E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4202' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER: Temporarily Abandon			[ ]

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.

1. 5-15-96 Set CIBP at 9666' - capped with 35' 3 sack cement plug.

2- 5-16-96 Loaded casing with 150 bbls fresh water, with 110 gals packer fluid. Pressurded casing to 500# 30 mins: chart a Hached

This Approval of Temporary Abandonment Expires 5-16-2001

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

SIGNATURE Gary T. Cothran TITLE Dist. Super. DATE 5-16-96

TYPE OR PRINT NAME Gary T. Cothran TELEPHONE NO.

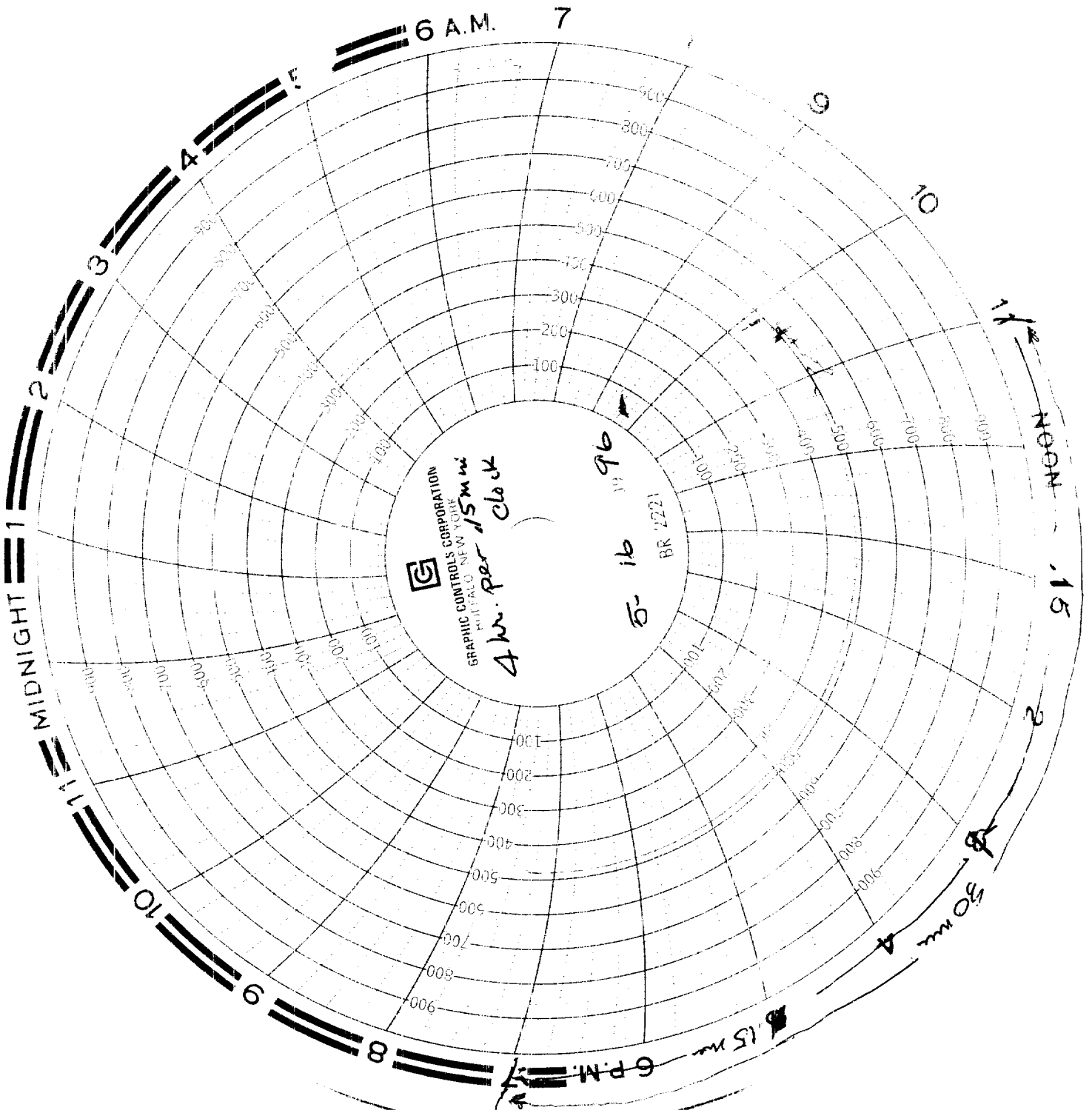
(This space for State Use)

APPROVED BY [illegible] TITLE DATE MAY 21 1996

CONDITIONS OF APPROVAL, IF ANY:

JCS


Received


6 A.M.
7
NOON
MIDNIGHT
6 P.M.
GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK
BR 2221
4 hr. per 1/5 mi
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