no <u>Regulation</u> The Owner and Operator	DATE J-2-03
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	3-2-83
Will continue testing well for another 60 days and monitor flu	id level.
2/23/83 Tested well - 7 1/2 spm - 120" stroke Trace of oil - 384 bbls. formation water - gas TSTM	
Started pumping well 2/5/83	
hung well on.	
 Swabbed well - recovered 682 bbls. of total fluid, no oil Laid disposal line to New Mexico SWD. Set pumping unit, h 	ooked up electricity;
HCL acid.	
 Schlumberger perforated 5 1/2 liner 9615 - 27 - 2 spf tota treated above perforations under packer down tubing with 5 	00 gals. NE/FE 15%
2. Tested old squeeze perforations with 1000% = held 5 min. 0	.K.
<pre>work) see RULE 1703. 1. MIRU Service Unit - Drilled out cement plugs inside 8 5/8</pre>	
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incl	uding estimated date of starting any prop
OTHER	
L OR ALTER CABING	
APORARILY ABANDON	PLUG AND ABANDONMENT
PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
Check Appropriate Box To Indicate Nature of Notice, Report of NOTICE OF INTENTION TO:	ENT REPORT OF:
N.A.	Lea <u>()</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
THE West LINE, SECTION 29 TOWNSHIP 95 RANGE 36E N	мям. <u>Д]]]]]]]]</u>
UNIT LETTER C 660 FEET FROM THE NORTH LINE AND 1980 FEET	
ocation of Well	10. Field and Pool, or Wildcat Crossroads, Penn.
P.O. Box 4364, Midland, Texas 79704	1
Tom R. Minihan ddress of Operator	Santa Fe "D" 9. Well No.
ame of Operator	8. Farm or Lease Name
OIL X GAB OTHER-	7. Onte Agreement Frank
SUNDRY NOTICES AND REPORTS ON WELLS 100 NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DECEDEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" FORM C-101) FOR SUCH PROPOSALB.]	7. Unit Agreement Name
SUNDRY NOTICES AND REPORTS ON WELLS	
DPERATOR	5. State Oil & Gas Lease No.
U.S.O.S.	State K Foo
SANTA FE SANTA FE, NEW MEXICO 87501	Sa. Indicate Type of Lease
	Revised 10-
DISTRIBUTION P. O. BOX 2088	Form C-103

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ONDITIONS OF APPROVAL, IF ANY