Submit 3 Copies to Appropriate District Office

State of New Mexico

Form C-103 Revised 1-1-89

m.

DISTRICT OTRICE			
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410		WELL API NO. 30-025-22577	
		6. State Oil & Gas Lease No.	
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"		7. Lease Name or Unit Agreement Name	
(FORM C-101) FOR SUCH PROPOSALS.)			
1. Type of Well: Off. GAS		Graham "C" State Com	
WELL XX WELL OTHER 2. Name of Operator			
Dwight A. Tipton		8. Well No.	
3. Address of Operator		9. Pool name or Wildcat	
c/o Oil Reports & Gas Services, Inc., Box 755,	No. Bagley Permo Penn		
Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u>	Line and 000	Feet From The West Line	
Section 17 Township 11S Ra	unge 33E N	NMPM Lea County	
10. Elevation (Show whether	DF, RKB, RT, GR, etc.)		
Check Appropriate Poy to Indicate h	Notice of No. 1		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF			
THE FIGURE OF THE PERSON TO.	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING CASING TEST AND C			
OTHER.			
	OTHER:		
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, an work) SEE RULE 1103.	d give pertinent dates, includi	ng estimated date of starting any proposed	
Well plugged and abandoned as follows:			
CIBP @ 8500 w/250' cement cap			
Load hole w/mud			
25 sx set @ 7000'			
95 sx 50' inside of 4 1/2" stub (4250') - Ta	gged plug @ 3820)'	
55 sx 50' inside of 8 5/8" stub (722') - Tagged plug @ 651' 75 sx across 11 3/4 shoe (410') - Tagged plug @ 323'			
10 sx surface w/dry hole marker. Well P&A'd	4/1/91		
Location cleaned, leveled and ready for inspection.			
I hereby certify that the information above is true and complete to the best of my knowledge and b	ali af		
ω . If ω	Agent	10/7/91	
SIGNATURE TYLE A STATE THE	E	DATEDATE	
TYPEOR PRINT NAME Donna Holler	505-39	3-2727 TELEPHONE NO.	
(This space for State Use)		. 7.54	
	OIL & GAG	The state of the s	
APPROVED IT JUSTIC CON K MILL	. Ulling	DATE	
CONDITIONS OF APPROVAL, IF ANY:			