

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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. <u>382-025-22744</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name PRUITT "A"
8. Well No. <u>1</u>
9. Pool name or Wildcat <u>Vader Penn</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) KB 4251

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.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator D MIL PRODUCTION INC.
3. Address of Operator P. O. BOX 49, ARGYLE, TX 79226
4. Well Location Unit Letter <u>E</u> : <u>1830</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>22</u> Township <u>9-S</u> Range <u>34-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) KB 4251

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>

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.

MIRU 3/11/94.
PLUG #1 - 5 1/2 CIBP 9750' W/25 SX CEMENT ON TOP.
PLUG #2 - 25 SX 7000'
PLUG #3 - 60 SX 4264' TAG 4089 5 1/2 STUB 4214' 8 5/8 SHOE 4209'
PLUG #4 - 150 SX 672' - TAG 359' 8 5/8 STUB 622' 11 3/4 SHOE 420'
RDMO 3/18/94
P&A 3/18/94
DRY HOLE MARKER INSTALLED
9.5 MUD BETWEEN ALL PLUGS

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

SIGNATURE W. L. Holmes TITLE OPERATIONS MANAGER DATE 3/28/94

TYPE OR PRINT NAME W. L. HOLMES TELEPHONE NO. 915-520-4103

(This space for State Use)

APPROVED BY Jack Griffin TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: