

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.	30-025-24392
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	L-494
7. Lease Name or Unit Agreement Name	Midwest-State
8. Well No.	1
9. Pool name or Wildcat	Vada (Penn)

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 <input type="checkbox"/>	
2. Name of Operator Fossil Fuels Inc.	
3. Address of Operator PO Box 479, Dallas, TX 75221-0479	
4. Well Location Unit Letter <u>N</u> : <u>990</u> Feet From The <u>south</u> Line and <u>1650</u> Feet From The <u>west</u> Line Section <u>2</u> Township <u>9-S</u> Range <u>33-E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input 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.

Request to plug back and workover well was granted 1/25/93. Remedial work has been delayed and extension of time is hereby requested for permit to plug back.

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

SIGNATURE

*Vance Payne*

TITLE

Vice President

DATE 7/9/93

TYPE OR PRINT NAME

Vance Payne

TELEPHONE NO. 214/969-5555

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE JUL 13 1993

CONDITIONS OF APPROVAL, IF ANY:

Expires Jan. 25, 1994

**RECEIVED**

JUL 23 1993

WCD HUBBS  
OFFICE