

R-8771 directionally drill to weathered outcrop see.
see order N/2 83/4 dedicated

MAR 16 1988

JUN 20 1990

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. 30-025-30316
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-2174
7. Lease Name or Unit Agreement Name State "26"
8. Well No. 2
9. Pool name or Wildcat Vada Devonian

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 Western Reserves Oil Company Inc.
3. Address of Operator P. O. Box 993, Midland, Tx 79702	4. Well Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>east</u> Line and <u>1910</u> Feet From The <u>south</u> Line Section <u>26</u> Township <u>10 South</u> Range <u>33 East</u> NMPM <u>Lea</u> County <u></u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>4218' DF</u>	

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 type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" 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.

Please see attached detailed daily report.

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

SIGNATURE Christopher P. Renaud TITLE Engineer DATE 05-09-90
(915)
TELEPHONE NO 683-5533

TYPE OR PRINT NAME Christopher P. Renaud

(This space for State Use)

APPROVED BY Jack Griffin TITLE OIL & GAS INSPECTOR DATE JUN 2 1990

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAY 10 1990

OCD
NOBBS OFFICE