Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

## 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	OIL CONSERVATION		WELL API NO.
DISTRICT II	P.O. Box 208 Santa Fe, New Mexico	30-025-31343	
P.O. Drawer DD, Artesia, NM 88210	D. Drawer DD, Artesia, NM 88210  Santa 1-e, New Mexico 8/304-2088		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE FEE  6. State Oil & Gas Lease No.  V-2522
SUNDRY NOTI	CES AND REPORTS ON WEL	LS	
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESER (FORM C-	POSALS TO DRILL OR TO DEEPEN VOIR. USE "APPLICATION FOR PER 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A RMIT"	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS	OTHER		FOX "A" STATE
WELL WELL  2. Name of Operator			
	TERFRISES, INC	2	8. Well No.
		9. Pool name or Wildcat	
3103 79 -1 4. Well Location	3103 79 4 ST. LUBBOCK, Tx. 79923		
	OFeet From The NORTH	Line and ZO	70 Feet From The WEST Line
Section Z			1
Section ~	Township 5 Ran  10. Elevation (Show whether L	ige JOE N OF, RKB, RT. GR. etc.)	MPM LEA County
	<i>'/////</i>	055.6	
11. Check A	appropriate Box to Indicate N	lature of Notice, Re	port, or Other Data
NOTICE OF INT	ENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON			
	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB 🔀
OTHER:		OTHER:	
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	ons (Clearly state all pertinent details, and	give pertinent dates, includi	ng estimated date of starting any proposed
1)		$\mathcal{L}$	
DRILLED TO	1D 12,483 F	TAA	N 51" 23# ¿ 20#
N-80 CASING	TO TO \$	CEMENTE	ED W/ 500 84.
			•
CLASS H- FOZ.	mix PLUS 13	500 Sx H	ALLIBURTON LITE
BUMPED PL	163 È TEST.	ED TO Z	000 PSI HELD OK
· RELEASED FR	RESSURE & FLOA	T HELD - 1	RESSURE TO 1000 Flore
NTEND TO RU	N FOROSITY LOE	ss - Penro	PRATE F TEST FOR
FRODOLYIVE 1	NIERXALS.		
I hereby certify that the information above is true a	nd complete to the best of my knowledge and be	lid.	
SKINATURE ACCURATE		TRESIDEN	
TYPE OR PRINT NAME DONALD	P. LAYVON		806/ TELEPHONE NO. 745 - 46-3
(This space for State Use)	\$10 W.S		99 <b>7 0 1 1991</b>
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