State of New Mexico

to Appropriate District Office	Energy, Minerals and Natural Resources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hoose, P.M. 88240	2040 Pacheco St.	30-025-34255
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87505	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		6. State Oil & Gas Lease No. 22212
(DO NOT USE THIS FORM FOR PRODEFFERENT RESERVED.) (FORM C	ICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A RVOIR. USE "APPLICATION FOR PERMIT" -101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER	Henard Unit
2. Name of Operator		8. Well No.
Cobra Oil & Gas Co	orporation	9. Pool name or Wildcat
3. Address of Operator	nita Falls, TX 76307-8206	Gladiola (Devonian)
P.O. Box 8206 Wich	nita Falls, TX 76307-8206	Gladiola (Bovonian)
	Feet From The North Line and 23	B10 Feet From The East Line
Section 26	Township 11S Range 37E	NMPM Lea County_
	10. Elevation (Show whether DF, RKB, RT, GR, etc.)	V/////////////////////////////////////
	3923' GR	<u> </u>
11. Check	Appropriate Box to Indicate Nature of Notice, R	
NOTICE OF INT	FENTION TO: SUE	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND C	EMENT JOB LX
OTHER:	OTHER:	
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all pertinent details, and give pertinent dates, incli	ding estimated date of starting any proposed
hole to 435'. Run Services and cemen	6/98 @ 8:00 PM with Patterson Ri 13 3/8" 48# H-40 casing and sent with 425 sacks Class "C" ceme 34 cuft/sack. Cement was circu $1/6/98$.	t @ 435'. Rig up B.J. nt with 2% CaCl @ 14.8 ppg
	and complete to the best of my knowledge and belief. Production	Supervisor DATE 1/7/98
SKONATURE 1004 Ce		DATE 716-5
TYPEOR PRINT NAME ROTY Edw	ards	IELEPTIONE NO. () TO)
(This space for State Use) ORIGINAL SIG	NFD BY CHRIS WILL IAMŞ OT SUPERVIS OR	in a fi saan
		AN 20 1979

CONDITIONS OF APPROVAL, IF ANY:

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