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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. <u>30-041-00016</u>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <u>LH-2338-1</u>
7. Lease Name or Unit Agreement Name <u>Fox "B" STATE</u>
8. Well No. <u>1</u>
9. Pool name or Wildcat <u>ALLISON PENN</u>

**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 <u>LAYTON ENTERPRISES, INC.</u>
3. Address of Operator <u>3103 79TH ST LUBBOCK, TX. 79423</u>	4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>36</u> Township <u>8S</u> Range <u>36E</u> NMPM <u>ROOSEVELT</u> County <u>ROOSEVELT</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>4079 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"/>	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: <u>COMMENCE PRODUCTION</u> <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.

INSTALLED PUMPING EQUIPMENT AND STARTED  
PRODUCING WELL ON 11-11-91.  
COMPLETION REPORT AND TEST TO FOLLOW.

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

SIGNATURE Donald R. Layton TITLE PRESIDENT DATE 11-12-91  
TYPE OR PRINT NAME DONALD R. LAYTON TELEPHONE NO. 806/745-4638

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NOV 14 1991

RECEIVED

NOV 13 1991

208  
HOBBS OFFICE