ENERGY AND MINERALS DEPARTM			
we. or corice Acceives	OIL CONSERVATION DIVISI 1	_	
DISTRIBUTION	P. O. BOX 2088	Form C-103 Revised 10-1	
SANTA PE	SANTA FE, NEW MEXICO 87501	RETTJEG 15-	
PILE		5a. Indicate Type of Lease	
U.S.O.S.	_	State X Fee	
OPERATOR .		5, State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DOTILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			
OIL GAB WELL	other- Salt Water Disposal Well	7. Unit Agreement Name	
2. Name of Operator		8. Form or Lease Name	
Pauley Petroleum Inc.		State	
. Address of Operator		9, Well No.	
310 West Texas, S	Suite 822, Midland, Texas 79701	1	
. Location of Well		10. Field and Pool, or Wildcat	
ими петтем В	660 FEET FROM THE NOrth LINE AND 1980 FEE	Tucker Ranch	
•	The Property of the State of th	THITTINI THE	
THE East LINE, BEC	TION 16 TOWNSHIP 7 RANGE 33	NMPM.	
mmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County	
		Roosevelt	
			
	Appropriate Box To Indicate Nature of Notice, Report of INTENTION TO: SUBSEQ	or Other Data UENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORASILY ASANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	· ·	
	OTHER	_	
OTHER			
7. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, inc	luding estimated date of starting any prope	
-•· •	to tank to reduce pressure.	•	
Released seal as	ssembly & POH w/tbg.		
Redressed seal a	assembly and replaced one joint tubing and RIH.	•	
4. Circulated hole	clean $w/2\%$ KCL water containing packer fluid.	•	
Latched tubing i	into packer with 9000 lbs. of tension.		
6. Flanged up wellh	nead.		
7. Charger Inc. pre	essured up 8 $5/8 - 2 3/8$ " annulus, to 300 psi,	wellhead flange leaked,	
tightened flange	e and retested to 300 psi for 15 min. (chart a	ttached)	
8. Return well to a	Return well to active disposal.		

Division Manager

DATE 5/7/86

MAY 9 - 1986

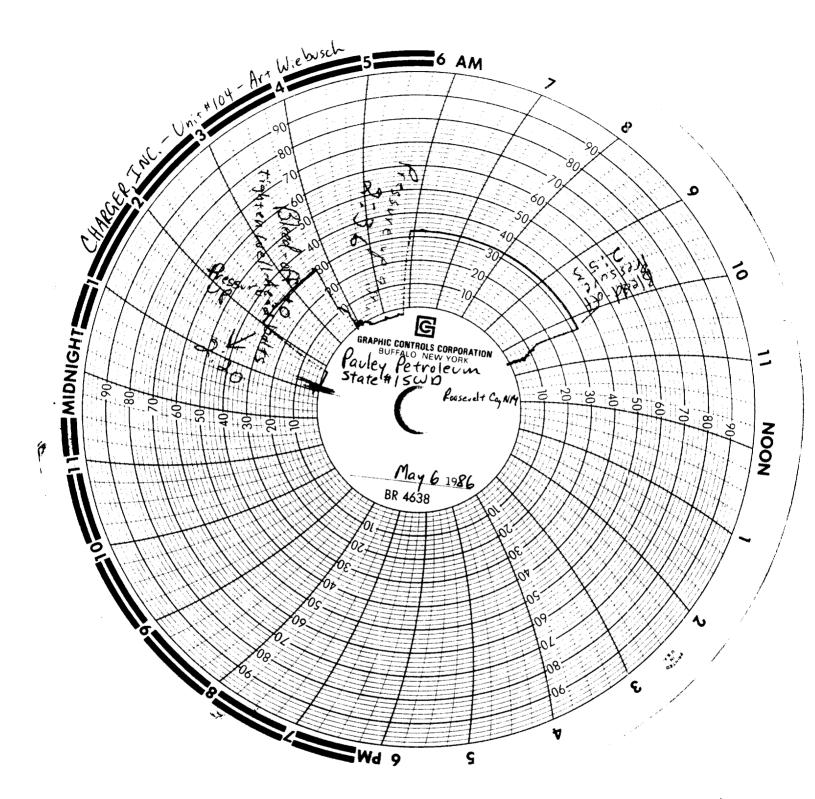
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY JERRY SEXTION

DISTRICT I SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY:

And South States of the States



HORRESCH, CH.