NO. OF COPIES ACCESY				Form C-103
DISTRIBUTION		-		Supersedes Old
SANTA FE		NEW MEXICO OIL CONSER	C-102 and C-103 Effective 1-1-65	
FILE		NEW MEXICO OIL CONSER	ANTION COMMISSION	Friegra 1-1-02
				5a. Indicate Type of Lease
LAND OFFICE		•		State Fee
				5, State Oil & Gas Leasy No.
OPERATOR				E-8250-1
	CLUVODY HOTIC			All Illiani
SUNDRY NOTICES AND REPORTS ON WELLS 100 NOT USE THIS FORM FOR PROPOSALS TO DITLE ON TO GETTEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 105 "TAPPOSTATION FOR PERMIT AT THE PROPOSALS.")				
1.	USE MAPPEICATION FOR PER	COT _" (FEND C-101) FOR SUCH PR	OP05AL5.)	7. Unit Agreement Name
011	GAS	•		
2. Name of Operator	WELL OTHER.			8, Farm of Lease Lame
	W . 5.5	-		
3. Address of Operator	Well Servicing,	Ine.	·	Medlester State Com
				1
d/e Oil Rep	orts & Gas Servic	es, Inc., Box 763, H	abbs, IM 88240	10. Field and Pool, or Wildcat
4. Location of well				
UNIT LETTER	<u> 1960 </u>	FEET FROM THE	LINE AND 660 FEE	T FROM Te bes (Penn)
		·		
THE South	LINE, SECTION2	O TOWNSHIP BS	RANGE 33E	NMPM. ()
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
		15. Elevation (Show whether DF,	RT, GR, etc.)	12, County
	7//////////////////////////////////////			Chaves
16.	Check Appropri-	ate Box To Indicate Natu	re of Notice, Report	or Other Data
N	OTICE OF INTENTIO		•	UENT REPORT OF:
PERFORM REMEDIAL WOR		PLUG AND ABANDON RE	MEDIAL WORK	ALTERING CASING
	^ <del> </del>		OMMERICE DRILLING OPHS.	PLUG AND ABANDONMENT
TEMPORARILY ABANDON		(m)	ISING TEST AND CEMENT JOS	TEGG AND ABARDONNER!
PULL OR ALTER CASING		CHANGE PLANS CA		- ·
	Repair Casing	[ <b>3</b> 2]	OTHER	
OTHER	TO DOWN A CONTROL			
17. Describe Proposed	or Completed Operations (C	learly state all pertinent details,	and give pertinent dates, inc	luding estimated date of starting any proposed
work) SEE RULE 1				
	Contra college	4 a4 6516 Y4 4a		/OH
		d at 6516. It is pro		/2" easing,
	Leten could at	th casing bowl and a	stempt to the into	stub.
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16 I barahu astifu that	the Information whose is to	we and complete to the best of my	kno viedge and belief.	
18. I hereby certify that	the information above is tr	ue and complete to the best of my	kno viedge and belief.	
18. I hereby certify that	the information above is tr	ue and complete to the best of my	knovledge and belief.	
18. I hereby certify that	the information above is tr	ue and complete to the best of my	knowledge and belief.	DATE 6/9/77
1/4	Jalles .		knowledge and belief.	DATE 6/9/77
1/4	Orig. Signed by Jerry Sexton		kno viedge and belief.	OATE

CONDITIONS OF APPROVAL, IF ANYI

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