STATE OF NEW MEXICO	,		
ENERGY AND MINERALS DEPARTMENT			
OIL CONSERVATION DIVISION			
DISTRIBUTION P. O. BOX 2083	Form C-103 Revised 10-1-78		
SANTA FE SANTA FE, NEW MEXICO 97501	NG41360 10-1-10		
U.S.G.S.	Sa. Indicate Type of Lease		
LAND OFFICE	State Fee X		
OPERATOR	5. State Oll & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS			
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)			
L. OIL X GAB OTHER-	7. Unit Agreement Name		
2. Name of Operator	8. Farm or Lease Name		
ARMSTRONG ENERGY CORPORATION			
3. Address of Operator	Sara 9. Well No.		
P.O. Box 1973, Roswell, New Mexico 88201	3. 111110.		
4. Location of Well	10. Field and Pool, or Wildcat		
UNIT LETTER J .1980 FEET FROM THE South LINE AND 1980 FEET FRO	Tower-San Andres		
UNIT LETTER,, FEET FROM THE LINE AND FEET FRO			
THE East LINE, SECTION 3 TOWNSHIP 11s RANGE 31e NMPN			
THE RANGE LINE, SECTION TOWNSHIP RANGE NMPN	« <i>ΚΗΗΗΗΗΗΗΗΗΗ</i>		
The second s	12. County		
4,506.3 GL	Chaves ())))))		
16. Check Appropriate Box To Indicate Nature of Notice, Report or O	ther Data		
	T REPORT OF:		
PERFORM REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT		
PULL OR ALTER CASING			
OTHER	Acidize x		
OTHER			
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, includin,	g estimated date of starting any proposed		
work SEE RULE 1103.			
2-14-81 Perforate 4,174' and 4,176' with 2 holes per foot.	Treat with 500 calc		
15% MCA acid, swab back.	ileat with J00 gals.		
2-15-81 Treat with 2,000 gals. 20% NEFE, swab back.			
2-16-81 Shut down.			
2-17-81 Perforate 4,132', 4,142', 4,147', 4,154', 4,199' and	d 4,203' with 2 holes		
per foot.			
2-18-81 Treat with 3,500 gals. 20% NEFE, swab back.			
2-19-81 Placed on pump and testing.			
5-14-81 Pull rods & tubing, prepare to reacidize.	71.9/ 1 1 1		
5-15-81 Treat perforations 4,132' to 4,202' with 3,000 gals 30% methanol & 3,000 gals. CO2.	. /%% hydrocloric acid		
5-16-81 Replaced on pump. Testing on pump.			
5 10 of hepfaced on pamp. Testing on pamp.			
18. I hereby certify that the information above is true and complete to the beat of my knowledge and helief.			
Kith & Allen L.			
DIGNED AUtor / Talkist President	<u></u>		

	Only Signed by			JUN	3	1991
APPROVED BY	Jerry Sexten	TITLE	DATE		·	
CONDITIONS OF APPROVAL, IF ANY	Det L Supv					