STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

we. of Corice Acctives	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

SANTA FE			Revised 10-1-78
FILE	SANTA PE, NEW	MEXICO 87501	
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR	l		5. State Oil & Gas Lease No.
SUMDR	Y NOTICES AND DEPORTS ON	IWELLS	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" IFORM C-101) FOR SUCH PROPOSALS.)			
1.			7. Unit Agreement Name
WELL XX WELL	OTHER-		
2. Name of Operator Sun Exploration & Production CoMidland		8. Form or Lease Name	
3. Address of Operator		New Mexico "BA" State	
P. O. Box 1861, Midlar	nd, Texas 79702		9. Well No.
4. Location of Well			10. Field and Pool, or Wildcat
K	2310 FEET FROM THE SOUTH	1980	·
UNIT LETTER	FLET FROM THE SOUCH	LINE AND 1200 PEET PRO	
THE West LINE, SECTION	on 16 TOWNSHIP 8S	RANGE 31E	
		· · · · · · · · · · · · · · · · · · ·	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
ÖMMA	4233.0		Chaves
Check A	Appropriate Box To Indicate N	Nature of Notice, Report or C	ther Data
NOTICE OF IN	ITENTION TO:	SUBSEQUE	NT REPORT OF:
	· · · · · · · · · · · · · · · · · ·		<u></u>
PERFORM REMEDIAL WORK	PLUG AND ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
		OTHER	
ОТИЕЯ			
17 Describe Proposed or Completed Op	erations (Clearly state all pertinent det	ails, and give pertinent dates, includi	ng estimated date of starting any proposed
work) SEE RULE 1103.			ag commerce dure of starting any proposed
3-19-85 SPUD 8:00 A.			
-	.m. C 34 jts 8-5/8 csg, CS 13	304 FC 1262 Howco cmt	w/450 eye Howco Tite +
			500-1000, circ 85 sxs cmt,J
3-28-85 RR R&C 92 jts		-	9:15 P.M
	3830, Hal pumped 20 bbls	mud flush, 5 bbls 2% KC	L, 20 bbls Flochek 21 +
	L, Hal cmtd $w/450$ sxs Cla	-	
	FP 600-1000, Float held		returns, did not circ
cmt, ND, set	slips & cut off csg RR	1:30 P.M.	
			·
			••
18. I hereby certify that the information	above is true and complete to the best	of my knowledge and belief.	
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BIGHED / llma	Kelfle TITLE ST.	. Accounting Asst.	4-17-85
	Wass seem		EDD & 0.400F
ORIGINAL SIGNED ST			APR 2 2 1985

RECE

APR 19 985

Hobba