Submit 3 Copies to Appropriate District Office

State of New Mexico Energy __merals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088

WELL API NO. 30-025-01853

DISTRICT II	Santa Fe, New Mexico 87	87504-2088	30 027 01073	
P.O. Drawer DD, Artesia, NM 88210	Dania 1 c, 1 cw Wickley	07504-2000	5. Indicate Type of Lease STATE X	FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. VB-325	PEE C
SUNDRY NOTICES AND REPORTS ON WELLS				
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERV			7. Lease Name or Unit Agreement Nam	ie
1. Type of Well:				
OIL XX WELL CAS	OTHER		State "24"	
2. Name of Operator Manticore Resources			8. Well No. 1	
3. Address of Operator			9. Pool name or Wildcat	
200 N. Loraine Suite	e 1230 Midland, TX	79701	Wildcat	
Unit Letter L : 1980	Feet From The South	Line and660	Feet From The West	Line
Section 24 Township 12 South Range 34 East NMPM Lea County				
	10. Elevation (Show whether)	DF, RKB, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
				<u></u>
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	3 <u></u>
TEMPORARILY ABANDON L CHANGE PLANS COMMENCE DRILLIN		OPNS. PLUG AND ABAND	DONMENT	
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB		
OTHER:		отнея: Perfora	ting & Acidizing	XX
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.				
<u>2-12-93</u>				
Move in and rig up pulling unit. Rig up Computalog and perforate interval 9120-9140' w/ 4 jspf51" entry hole.				
2-13-93		0.0% 27.77 1 1		
Acidize periora	tions with 2000 Gallor	ns 20% HCL + bal	l sealers.	
2-16-93 Acidized perfora	ations with 10,000 gal	llons 20% HCL +	additives.	
2-19-93		00101		
	ole. End of tubing at at 9047'. Flanged up		g nipple at 9177'. Tubi n pump and rods.	ng
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE SIGNATURE	π	19 EN	DATE 2-21	1-93
GENE	188	4	TELEPHONE NO.	122.138
TYPE OR PRINT NAME GC//C	ACC		I ELETTONE NO.	000

JUL 12 1993 (This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

- TITLE -

- DATE -

CONDITIONS OF AFFROVAL, IF ANY:

APPROVED BY-