bmit 3 Copies / Appropriate District Office

2. Name of Operator

CONDITIONS OF APPROVAL, IF ANY:

4. Well Location

11.

OTHER:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION

Santa Fe, New	Mexico	87504-2088
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OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088			WELL API NO.			
			5. Indicate Type of Lease STATE FEE XXX			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.					
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name			
DIFFERENT RESE (FORM C						
OIL GAS WELL X	ОТНЕЯ			Z. TAYLO)R	
2. Name of Operator				8. Well No.		
CARR WELL SERVICE,	INC.			3		
3. Address of Operator				9. Pool name or Wildcat		
P.O. BOX 69090 ODE 1. Well Location	SSA TX 79769-9090			GLAU	PIOLA-DEVONIAN	
	O Feet From The NORTH	į	Line and660	Feet From	n The <u>EAST</u>	Line
Section 7	Township 12-S			NMPM	LEA	County
	10. Elevation (Show w	vhether i	DF, RKB, RT, GR, etc.)		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	
					<u> </u>	
11. Check	Appropriate Box to Indi	cate N		-		
NOTICE OF IN	TENTION TO:			SEQUENT F	REPORT OF:	
ERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLIN	G OPNS.	PLUG AND ABANDO	NMENT XX
PULL OR ALTER CASING			CASING TEST AND C	EMENT JOB		
OTHER:			OTHER:			
12. Describe Proposed or Completed Opework) SEE RULE 1103.	rations (Clearly state all pertinent de	etails, ar	nd give pertinent dates, incl	uding estimated date	of starting any proposed	
	9550 CLASS C NEAT TA	AGGET	9106 ON 2-7-	89		
	TE HOLE W/9.5 # MUD					
	12 @ 4500 - 5870 CLASS C NEAT T	ran a	5770			
	15 SX @ 5870 CLASS C NEAT TOP @5770 15 SX @4550 CLASS C NEAT TOP @4450					
3-9-89 Cut $4-1$) i eq	450			
•		AGGE1	0 @4258 ON 3-10	-89		
3-10-89 10 SX @ 30' CLASS C NEAT TOP @SURFACE						

- DATE -

(This space for State	Use)	. A	
TYPE OR PRINT NAME			TELEPHONE NO.
I hereby certify that the	the information above is true and complete to the best	of my knowledge and belief. CEMENTER TITLE	DATE 12-30-88
3-10-89 3-10-89	10 SX @ 2273 CLASS C N	•	