

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals 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
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 35-025-21268
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-9503

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Pure State
2. Name of Operator J. M. Huber Corporation	8. Well No. 1
3. Address of Operator 7120 I-40 West, Suite 100 Amarillo, TX 79106	9. Pool name or Wildcat Saunders Permo Penn, East
4. Well Location Unit Letter <u>E</u> : <u>660</u> Feet From The <u>west</u> Line and <u>1980</u> Feet From The <u>north</u> Line Section <u>16</u> Township <u>14S</u> Range <u>34E</u> NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) KB 4148'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>Status of remedial operations</u> <input checked="" type="checkbox"/>	

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.

9/10 - 9/28/93 Pumping, testing.

9/28 - 10/6/93 Shut-in; waiting on well service unit to test for hole in tubing.

10/7 - 10/8/93 Pull rods & pump. Test for hole in tubing.

10/9 - 10/20/93 Shut-in; waiting on procedure to resume casing repair and fishing operations.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE William G. Horne TITLE Sr. Petroleum Engineer DATE 10-20-93

TYPE OR PRINT NAME William G. Horne TELEPHONE NO. 806 353-9837

(This space for State Use)

ORIGINAL SIGNED BY **JERRY SEXTON**
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE OCT 25 1993

CONDITIONS OF APPROVAL, IF ANY: