NO. OF COPIES RECEIVED			HODDO	Form C-103	
DISTRIBUTION		NEW MEXICO OIL CONSERVATION COMMISSION Effective 1-1-65			
SANTA FE	NEW M	EXICO OIL CONSERV	ATION COMMISSION	Effective 1-1-65	
FILE			MAY	2 Type of Lease	
U.S.G.S.					
LAND OFFICE				State K Fee	
OPERATOR				5. State Oil & Gas Lease No. K 4179	
				mmmmm -	
SI (DO NOT USE THIS FORM F USE "AP	JNDRY NOTICES AN	D REPORTS ON WELL TO DEEPEN OR PLUG BACK T (FORM C-101) FOR SUCH PRO	LS O A DIFFERENT RESERVOIR. POSALS.)		
1. OIL GAS WELL WELL	OTHER. D	ry Hole		7. Unit Agreement Name	
2. Name of Operator Sunset International Petroleum Corporation				8. Form or Lease Name Union State	
3. Address of Operator 201 Wall Bldg.,				9. Well No.	
4. Location of Well	2086	South South	766	10. Field and Pool, or Wildcat High Plains Penn	
East LINE		TOWNSHIP	RANGE 34E	_ NMPM.	
inc cinc				12. County	
		vation (Show whether DF, 4100.9 Gr.	N1, GR, etc.)	Lea	
	neck Appropriate Bo	ox To Indicate Natu	re of Notice, Report	or Other Data QUENT REPORT OF:	
NOTICE	OF INTENTION TO.				
PERFORM REMEDIAL WORK	PL		MEDIAL WORK MMENCE DRILLING OPNS.	ALTERING CASING PLUG AND ABANDONMENT	
TEMPORARILY ABANDON	.	— I	SING TEST AND CEMENT JOB		
PULL OR ALTER CASING		ANGE PLANS	OTHER		
Clean up	location	X			
OTHER				The second secon	
17. Describe Proposed or Compl work) SEE RULE 1103.	leted Operations (Clearly s	state all pertinent details,	and give pertinent dates, if	ncluding estimated date of starting any proposed	
contained mud 1 25 Sx, plug 910 (top of Tubb 73 Spotted 25 sx, p Shot off 8-5/8" Pulled 8-5/8"	laden fluid. 4 to 9023(Stu 880) Spotted 20 1 casing at 25 2 casing. Ran 20 2 cotted 25 sx, Complete 5 Pl	Pulled 4-1/2 ub of 4-1/2" of 25 sx, plug 49 4423 (bottom of 547. Spotted 2" EUE tbg and plug 357 to	casing. Ran csg.) spotted 2 976 to 4895 (T 8-5/8" csg 447 25 sx, plug 2 d spotted 25 s	asing at 9097. Hole 2" EUE tubing and spotte 5 sx, plug 7403 to 7322 top of Glorietta 4960) 5') 547 to 2507 (stub of 8- ix, plug 2023 to 1979 (to 13" surface pipe 345') oits to dry before final	
18. I hereby certify that the inf		complete to the best of m			
APPROVED BY	n w. Run		i. di	DATE	
CONDITIONS OF APPROVAL.	/ /	,			