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OPERATOR		

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease

State [X]   Fee [ ]

5. State Oil & Gas Lease No.

K-4480

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.
OIL WELL [XX]   GAS WELL [ ]   OTHER-

7. Unit Agreement Name

2. Name of Operator

Bell Petroleum Company

8. Farm or Lease Name

Paris-State

3. Address of Operator

P. O. Box 1538 - Midland, Texas 79701

9. Well No.

2

4. Location of Well

UNIT LETTER **"N"**, **660** FEET FROM THE **South** LINE AND **1980** FEET FROM

THE **West** LINE, SECTION **36** TOWNSHIP **13-S** RANGE **32-E** NMPM.

10. Field and Pool, or Wildcat

Baum Upper Penn

15. Elevation (Show whether DF, RT, GR, etc.)

4299.6' GR

12. County

Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]
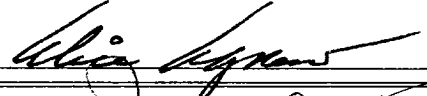
TEMPORARILY ABANDON [ ]

PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]

CHANGE PLANS [ ]

OTHER _____ [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]

COMMENCE DRILLING OPNS. [ ]

CASING TEST AND CEMENT JOB [X]

OTHER **Perforations & acidizing** [X]

ALTERING CASING [ ]

PLUG AND ABANDONMENT [ ]

17. 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.

1/29/70   Ran 318 jts 17# 5-1/2" csg set @ 9970'/400 sx Incor + 2% Gel & 8# Salt/sx, 3/4% CFR2; plug down 10:00 P.M. WOC 18 hrs; tested to 1000# for 30 mins - okay; released rig.

2/9/70   TD 9970' Logged & perforated @ 9846-51-52-53-54-55-73-74-75-76-77'.

2/11/70   TD 9970' A/4500 gals 20% NE; spotted 200 gals over perfs - - went to vacuum; inj 4300 gals @ avg rate of 5.7 BPM; pressures ranged from 2700-2900#; ISI: 0#; total load 250 bbls; swbg; prep to complete.

2/12/70   TD 9970' SD to install pump equipment.

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

SIGNED _____   TITLE **Production Supervisor**   DATE **12 February 1970**

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: