

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

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

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30 025 23619
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. NM 3138
7. Lease Name or Unit Agreement Name Baum State
8. Well No. 2
9. Pool name or Wildcat Baum Upper Penn
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4266' GL

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"/>	2. Name of Operator MWJ PRODUCING COMPANY	3. Address of Operator 400 W. Illinois - Suite 1100 Midland, Tx 79701
4. Well Location SL: L 990 Unit Letter BHL N: 1791 Feet From The west Line and 2310 646 Feet From The south Line Section 5 Township 14S Range 33E. NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4266' GL	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: well shut in <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.

4/1/91: Well Shut-in due to low production. Plan to plug and abandon.

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

SIGNATURE Pat Drexler TITLE Pat Drexler-Agent DATE 4/1/91

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)
ORIGINAL SIGNED BY JERRY LEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 05 1991

APR 04 1971

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