

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO. 30-025-24260

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No. 2-3301

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.)

7. Lease Name or Unit Agreement Name
Etcheverry State

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No. _____

2. Name of Operator
ERK Oil Company

9. Pool name or Wildcat
Tres Papalotes - Penn

3. Address of Operator
P.O. Box 310 Roswell N. M. 88202

4. Well Location
Unit Letter P : 660 Feet From The South Line and 500 Feet From The East Line
Section 32 Township 14S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4110 GR

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input 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.

1-25-1991 Set CIBP @ 4473' spot 50 sacks cement on top
1-25-1991 Spot 40 sxs cement @ 2600'-2500'
1-25-1991 Spot 10 sxs @ surface

Install dry hole marker
Hole circulated with 10# mud

Location clean and ready for inspection.

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

SIGNATURE [Signature] TITLE President DATE 9/26/91

TYPE OR PRINT NAME Joseph J. Kelly TELEPHONE NO. (505)623-3190

(This space for State Use)

APPROVED BY [Signature] TITLE OIL & GAS DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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