

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-3657

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Cabot Petroleum Corporation	8. Farm or Lease Name New Mexico 'T' State
3. Address of Operator P. O. Box 5001, Pampa, TX 79065	9. Well No. 4
4. Location of Well UNIT LETTER <i>DP</i> 660 FEET FROM THE South LINE AND 660 FEET FROM East 32 TOWNSHIP 13S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Baum Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4243' GR	12. County Lea

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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	

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.

- Spudded well at 7:30am 10/9/83. Moranco Drilling is the drilling contractor.
- Ran 13 3/8", 54-50#, J-55 casing to 400', cementing with 450 sacks Class C cement. Plug down at 2:30pm MST 10/9/83. Cement circulated to surface.
- After WOC 18 hours, tested with 1000 psi for 30 minutes. Tested o.k.

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

SIGNED Evelyn Farmer TITLE Agent DATE 10/12/83

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 17 1983

RECEIVED

OCT 14 1983

O.C.D.
HOBBS OFFICE