Submit 3 Copies to Appropriate District Office

State of New Mexico Minerals and Natural Resources Department Enc 4

Form C-10? Revised 1-1-

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION P.O. Box 2088

WELL API NO.

DISTRICT II Santa Fe, New Mexic	
P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease
DISTRICT III	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON W	VELLS ///////////////////////////////////
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP	PEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR	PERMIT 7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well:	Farma Live Com
OIL GAS WELL OTHER	lt + 7/21
2. Name of Operator	State 7 B Com  8. Well No.
BRIDGE OIL COMPANY	
3. Address of Operator	9. Pool name or Wildcat
12377 Merit Drive Suite 1600 Da.	llas. Tex 75251 Baum Upper Kenn
v. Weil Document	5.40
Unit Letter : 570 Feet From The South	Line and 540 Feet From The West Line
Section 18 Township 13	Range 33F. NMPM Lea County
	her DF, RKB, RT, GR, etc.)
11. Check Appropriate Box to Indicate	e Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. L PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB
OTHER:	OTHER:
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pertinent details work) SEE RULE 1103.</li> </ol>	, and give pertinent dates, including estimated date of starting any proposed
1 CIPP /2551	
1 CIBP w/35ft. cement or 100 ft.	plug and tag - above perfs
2. load hole w/10# salt gel 55# pe	er barrel
3. 100 ft. plug top Abo - 7500	
4. 100 ft. plug shoe 8-5/8 - 4051	
5. 100 ft. plug top salt 1665	,
•	
6. 10 sx surface plug	
I hereby certify that the information above is true and complete to the best of my knowledge a	
SIGNATURE Of MONTH / Daylie	mre
TYPEOR PRINT NAME OLANDER BAXTER	, ,
	TELEPHONE NO. 694 – 5464
(This space for State Use) Eddie W. Seay	JUN 2 1 1990
Oil & Gas Inspector	0011 % 1 1000
	TITLE DATE