State of New Mexico Encary, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I

I. Type of Well: OIL

WELL

2. Name of Operator

3. Address of Operator

Unit Letter

4. Well Location

11.

OTHER:

X

DWIGHT A. TIPTON

19

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

1825 N. French Dr., Hobbs, NM 88240 DISTRICT II

811 S. First, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd. Aztec, NM 87410 DISTRICT IV 2040 South Pacheco, Santa Fe, NM 87505

OIL CONSERVATION DIVISION

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF TO DEEPEN OR PLUG BACK TO A

c/o OIL REPORTS & GAS SERVICES, INC.,1008 W. BROADWAY, HOBBS, NM 88240

NOTICE OF INTENTION TO:

OIL	CONSERVAT	_	WELL API NO.				
Santa Fe, New Mexico 87505				30-025-30180 5. Indicate Type of Lease STATE FEE X			
NM 87505		-	6. State Oil & Gas Lease No.				
SHNDDA NO.	TICES AND REPORTS	ON WELLS					
RM FOR PROPOSALS DIFFERENT RESER	TO DRILL OF TO DEEPE VOIR USE "APPLICATION) FOR SUCH PROPO		7. Lease Name or Unit Agreement Name				
GAS WELL	OTHER		HUBER LOWE				
IPTON				8. Well No.			
& GAS SERVICES, INC.,1008 W. BROADWAY, HOBBS, NM 88240				9. Pool name or wildcat KING; WOLFCAMP			
660 Feet F	rom The SOUTH	Line and	660	Feet From The	WEST	Line	
Township 13S	Range 38E			NMPM	LEA	County	
	(Show whether DF, RKB, RT, GR, e						
Check Appropriate	Box to Indicate Nati	ure of Notice,	Report, or Oth	ner Data			
TICE OF INTEN	ITION TO:		SUBSEQUE	NT REPORT OF	:		
ORK PLU	G AND ABANDON	REMEDIAL W	ORK	ALTERIN	G CASING		
ON CHA	NGE PLANS	COMMENCE	ORILLING OPNS.	PLUG & A	BANDONMENT		
3 <u> </u>		CASING TEST	& CEMENT JOB				

OTHER:

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.

03/09/97 SET CIBP @ 9500' W/25' CMT. PERF'D 9422'-9437'. ACDZ'D W/5000 GALS NEFE. TEST UNSUCCESFUL.



X

				- 1000
I hereby certify that the information above is true and com	plete to the best of my	knowledge and belief.		
SIGNATURE JOHN John d-	TITLE	AGENT	DATE	02/11/01
TYPE OR PRINT NAME Gaye Heard			TELEPHONE NO. (505	5) 393-2727
(THIS SPACE FOR STATE USE) APPROVED BY TITLE	D	INAL SIGNED BY AUL F. KAUTZ	I	FEB 1 8 2002
CONDITIONS APPROVAL, IF ANY:	PETRO	DLEUM ENGINEER		