

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

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

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

WELL API NO.	30-025-31248
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	

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 Dye	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	8. Well No. 1		
2. Name of Operator Deane H. Stoltz	9. Pool name or Wildcat Wildcat		
3. Address of Operator P.O. Box 50878, Midland, Tx 79710			
4. Well Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>27</u> Township <u>13S</u> Range <u>34E</u> NMPM <u>Lea</u> County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4134.5 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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input checked="" 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.

5/30/91-Ran 4359' of 8 5/8" casing-set @ 4328'. 1910' of 24# and 2446' of 32# J-55 ST&C Float Collar and Float Shoe-Pumped 1200 sxs PSL + 5% Salt 1/4# sx Seal and 200 sxs Class "C" + 1% CACL2-Circulating @ 250# displacement 2000#-bumped plug @ 2250#-tested OK-cement circulated to surface-estimated 150 sxs-plug down @ 5:30 a.m. 5/31/91. 6/1/91 tested with rig pump to 1000#.

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

SIGNATURE <u>James A. Lawson</u>	TITLE <u>Manager</u>	DATE <u>8/6/91</u>
TYPE OR PRINT NAME <u>James A. Lawson</u>	TELEPHONE NO. <u>(915)-687-5206</u>	

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: