State of New Mexico rais and Natural Resources Department Energy, 1

Form C-103 Revised 1-1-89

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

OIL CONSERVATION DIVISION

DISTRICT II

P.O. Box 2088

CONDITIONS OF APPROVAL IF ANY: 504 EXTER Plug @ 2952"

P.O. Drawer DD, A	rtesia, NM 88210
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Santa Fe, New Mexico 87504-2088

30-025-33748		
5. Indicate Type of Lease STATE X	FEE	
6 State Oil & Gas Lesse No.		

- DATE -

	STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410	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 P DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	LUG BACK TO A 7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)	State 26
1. Type of Well: OR. GAS WELL X WELL OTHER	
2. Name of Operator	8. Well No.
Rand Paulson Oil Company, Inc. Ogrid #15912	3 1 9. Pool name or Wildcat
3. Address of Operator	9. Pool name or wincar Wildcat
508 W. Wall, Ste. 100 Midland, TX. 79701	
Unit Letter L: 1800 Feet From The South	Line and 990 Feet From The West Line
Section 26 Township 13S Range	37E NMPM Lea County
10. Elevation (Show whather DF, RI	
//////////////////////////////////////	
11. Check Appropriate Box to Indicate Natur	re of Notice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REM	MEDIAL WORK
TEMPORARILY ABANDON	MMENCE DRILLING OPNS. U PLUG AND ABANDONMENT U
PULL OR ALTER CASING CAS	SING TEST AND CEMENT JOB
OTHER: OTH	IER:
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give work) SEE RULE 1103.	persinent dates, including estimated date of starting any proposed
1. SET 51/2 CIBP @ 9500' w/35' cmt.	CIRC Hole w/ 9.5 # MUD
2. Cut & Pull 5 1/2 C59 @ = 7500'	
3. SPOT 405X ON 51/2 STUB. WOC \$ 7	
4. SPOT 50 SX @ 5050, WOC & TAG	8 % SNOF PLUG.
5. 500+ 358x @ 1800'	
6. Cut & Pull 8 % CSG@ ±500'	
7. SPOT 60 SX ON 8 1/8 STUB, WO	
8. SPOT 100 SX @ 450', WOC \$TAG	- ,
9. Spot 10 St @ SURFACE - INST	-ALL DRY Hole MARKER
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE BOLS Chrowcher TITLE	9GENT DATE 1/19/98
TYPEORPRINTNAME BOB SCHMUCKER	TELEPHONE NG4/5-697-075
(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR	ور هاران داده
DISTRICT I SUPERVISOR	taran da antara da a