

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

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2148
7. Lease Name or Unit Agreement Name <del>18-13</del> State 18
8. Well No. #2
9. Pool name or Wildcat Maljamar Grayburg San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

**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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection</u>	2. Name of Operator Murphy H. Baxter
3. Address of Operator P. O. Box 2040, Midland, TX 79702	4. Well Location Unit Letter <u>L</u> : 1980 Feet From The <u>South</u> Line and <u>693.65</u> Feet From The <u>West</u> Line Section <u>18</u> Township <u>17S</u> Range <u>33E</u> NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <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.

1. Squeeze perfs @ 4129' - 4380' w/ 100 sacks of cement. Shut well in overnight.
2. Cut tubing @ ±3950'.
3. Spot 25 sks. of cement on top of packer.
4. Perforate @ 300'.
5. Circulate cement to surface.
6. Cut off wellhead. Erect dry hole marker.
7. Clean location.

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

SIGNATURE G. A. Baber TITLE Cementer Baber Well Servicing Co. DATE 4-3-89  
TYPE OR PRINT NAME G. A. Baber, President TELEPHONE NO. 505-393-5516

(This space for State Use)

**ORIGINAL SIGNED BY JERRY SEXTON**  
**DISTRICT I SUPERVISOR**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**APR 5 1989**

RECEIVED

APR 4 1989

OCD  
HOBBS OFFICE