State of New Mexico Minerals and Natural Resources Department En

Form C-163

OH CONSEDVATION DIVISION

Revised 1-1-49

P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088		WELL API NO.		
DISTRICT II		30-025-05132			
P.O. Drawer DD, Artesia, NM \$8210			5. Indicate Type of Lease STATE FEE XX		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		•	6. State Oil & Gas L		
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 DENTON NORTH WOLFCAMP UNIT		
1. Type of Well:	.,		TRACT 14		
OEL X WILL OTHER			(8910087370)		
2. Name of Operator STEPHENS & JOHNSON OPER	ATING CO.		8. Well No. 5		
3. Address of Operator P. O. BOX 2249, WICHITA	FALLS, TX 76307-22	49	9. Pool same or Wild DENTON WOLFO		
4. Well Location	Monmi	4.5	20	LIDOT	<del>.</del>
Unit Letter E : 2310	Feet From The NORTH	Line and	Feet Prom Ti	WEST	Line
Section 26 (SWNW)	Township 14S	Range 37E	NMPM LEA		County
	10. Elevation (Show when 3827 DF, 381	her DF, RKB, RT, GR, etc.)			
11. Check Ar	opropriate Box to Indicate	<del> </del>	eport, or Other D	<i>COLORADA</i> Data	
NOTICE OF INTE	• •	-	SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	A	TERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING		UG AND ABAND	_
PULL OR ALTER CASING		CASING TEST AND CE		UU ANA UNA	CHMEN!
OTHER:	Г	OTHER:			Γ
<ol> <li>Describe Proposed or Completed Operation work) SEE RULE 1103.</li> </ol>	n (Clearly state all pertinent datails	s, and give perlinent dates, inclu	ding estimated date of st	arting any proposed	
Shut-in producing well. dumped 4 sacks (35') of		-91. On 12-10-91	, Set CIBP at	9200' and	
See attached for pluggi	ng procedure.				
			DAY A HOY BE NO		
		e de la companya de l	ino di cours Carolina sua <b>Tr</b>	KING OF KE CAOS	
		70 A APROX			
		***			
I hereby certify that the information above is the party	d complete to the best of my knowledge	and belief.		<del> </del>	
		Manager of	Operations	4/2	/96
SIGNATURE VICENTIAN C		TITUE		(817)723-2	166
TYPE OR PROPET NAME PEYTON S.	CARNES, JR.			TELEPHONE NO.	
(This space for State Unit) RIGINAL SIGNED	BY JERRY SEXTON				
	SUPERVISOR			APR 18	1996
APPROVED BY		TITLE		- DATE	

\_ TITLE -

APPROVED BY --

Received
Hobbs
OCD