Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

WELL API NO. 30-025-05242

5. Indicate Type of Lease STATE [X] FEE [ ]

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: State "A"

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: Williams-Cody, Inc.

8. Well No. 1

3. Address of Operator: 16825 Northchase Dr., Suite 1200 Houston, TX 77060

9. Pool name or Wildcat: Denton (Devonian)

4. Well Location
Unit Letter H : 2310 Feet From The North Line and 990 Feet From The East Line

Section 2 Township 15-S Range 32-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3814'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[X]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			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.

POOH w/1-1/2" x 26' polish rod. 1 12' - 1.25" FG rod sub + 137 1.25" FG rods, FG body break. RIH w/2-1/2" fish. Trouble catching fish. Unseated pmp. POOH w/rods & fishing tool. Replace FG rod. RIH w/rods, replaced 1-1/2" x 26' polish rod & 16' x 1-3/4" polish rod liner. Hung well on. Load tbg w/27 bbls of prod wtr. Ck pmp action. RD. Clean location. Return to production.

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

SIGNATURE Jo Ann Curtis TITLE Supv. Prod/Regulatory Affairs DATE 3/03/93

TYPE OR PRINT NAME Jo Ann Curtis TELEPHONE NO. (713) 875-8701

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: