STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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Form C-103

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AND OFFICE	$\neg \neg \neg$			

SANTA FE, NEW MEXICO 87501	Revised 10-1-7
U.S.O.S.	5a. Indicate Type of Lease
LAND OFFICE	State Fee X
OPERATOR	5. State Oil & Gas Lease No.
	10666
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO ORILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOI	mmmmillink
(DO NOT USE THIS FORM FOR PROPOSALS TO ORILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOI USE "APPLICATION FOR PERMIT -" IFORM C-101) FOR SUCH PROPOSALS.)	• (
	7, Unit Agreement Name
WELL X WELL OTHER-	
2. Name of Operator	8. Farm or Lease Name
Polaris Production Corp.	Lee Carter
3. Address of Operator	9. Well No.
P. O. Box 1749, Midland, Texas 79702	1
1. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER M 510 FEET FROM THE West LINE AND 660	Medicine Rock (Dev.)
THE South LINE, SECTION 14 TOWNSHIP 15-S RANGE 38-E	
TOWNSHIP RANGE	— NMPM. (
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3736' GR	Lea
Check Appropriate Boy To Indiana Name (A)	
Check Appropriate Box To Indicate Nature of Notice, Repo	
SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	
REMEDIAL WORK	ALTERING CASING
COMMENCE DRILLING OPHS.	
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JQ	
OTHER	
7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates work) SEE RULE 1103.	including estimated date of starting any proposed
work) SEE RULE 1103.	the second secon
The following work is proposed to begin as 12 10 00 0 0 0	
The following work is proposed to begin on 12-19-88 @ 8:00 a.m notice will be given before actual operations begin).	n. New Mexico time (48 hrs.
segin).	
1. Set CIBP & 3 sx cmt @ 12,750'.	
2. Load hole w/ 9.5# mud.	
3. Shoot & recover 9500' of 4½" csg.	
4. Set plugs as follows:	
20 sx @ 9550-9450'	
25 sx @ 8193-8093'	
30 sx @ 6460-6360'	
30 sx @ 4954-4854'	
5. Shoot & recover 1500' of 8 5/8" csg.	
6. Set plugs as follows:	
60 sx @ 1480-1380'	
10 sx & marker @ surface	
10 5% d marker & Surface	
8. I hereby certify that he information above is true and complete to the best of my knowledge and belief.	
A A A A A A A A A A A A A A A A A A A	
1. 14.1 / Can.	
riter President	DATE 11-1-88
ORIGINAL SIGNED BY JERRY SEXTON	
DISTRICT I SUPERVISOR	**

CONDITIONS OF APPROVAL, IF ANY: