Submit 3 Copies to Appropriate District Office

## State of New Mexico ergy, Minerals and Natural Resources Departm.

Form C-103 Revised 1-1-89

DISTRICT

<b>OIL CONSERVATION</b>	DIV	TSION
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WELL API NO.		
5 Indicate Type of Lesse	· · · · · · · · · · · · · · · · · · ·	

P.O. BOX 1980, HODOR, NM 88240	P.O. Box 208			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lesse No.  K 5274	
SUNDRY NOTICE	S AND REPORTS ON WEL	ıs		
( DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO (FORM C-10	DSALS TO DRILL OR TO DEEPEN DIR. USE "APPLICATION FOR PEF 1) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A 📑	7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL X WELL	OTHER		CABOT STATE	
2. Name of Operator			8. Well No.	
GEORGE A. CHASE			9. Pool name or Wildcat	
3. Address of Operator Box 637 ARTESIA, N	им 88211-0637		Feather Wolfcamp	
4. Well Location				
Unit Letter C: 660	Feet From The North	Line and 1980	Feet From The West Line	
Section 29			NMPM LEA County	
	10. Elevation (Show whether i	DF, RKB, RT, GR, etc.)		
11. Check Ap	propriate Box to Indicate I	Nature of Notice, Re	eport, or Other Data	
NOTICE OF INTE	NTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING	<del></del>	CASING TEST AND CEMENT JOB		
OTHER:		OTHER:		
CIBP and dump 35' of 6/16/89 Halliburtor at 7600' Set 50 sain at 1000 lbs. pre 4110', pull out to pull tubing, 6/17, hole with brine wat cellar. 6/30/89 Mo	39-Pull rods, 6/15, cement on top of point mix salt water grack plug at 5100'-essure up twice, House 450' squeeze with 489 Run tubing, there and gel. 6/27, ove tanks, pump jages.	/89 Pull tubi lug. Perforat el, circulate -Run packer t alliburton se 100 sacks ce ag cement at /89-Set 10 sa ck, tubing,ro	ng & packer,Ryco set ed at 4110' and 430' ed hole,set 25 sack plug to 3975'couldn't pump et 50 sack plug at	
I hereby certify that the information above is true a  SIONATURE  TYPEOR PRINT NAME GEORGE A	+ Clase m		DATE 7/5/89 TELEPHONE NO. 457-243	
(This space for State Use) Eddie W	•		JUL 1 2 1989	
A TRANSPORTED BY		7.F	DATE	

RECEIVED

JUL 7 1989

OCD HOBBS OFFICE

WHISE III.