PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

11.

OTHER:

State of New Mexico Energy, Minerals and Natural Resources Department

ΛП	CONSERVA	TION	DIVISION

	Cine of Non M.	exico	Form C-103
Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Minerals and Janural Resources Department		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATIO 310 Old Santa Fe Trail		, Room 206	WELL API NO. 30-025-29794
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexi	ω 87503	5. Indicate Type of Lease STATE FEE XX
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PRODIFFERENT RESERVED	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PEI 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL (X) GAS WELL (X) WELL [OTHER		Meyers
2. Name of Operator Amerind Oil Company Lim	ited Partnership		8. Well No. 2
3. Address of Operator 415 W Wall Suite 500, M		Knowles	9. Pool name or Wildcax Drinkard West
4. Weil Location	Feet From The South	Line and2130	O Feet From The West Line
Section 33	Township 16S Re		MPM Lea County
	10. Elevation (Show whether 3782 GL	DF, KKB, KI, GK, EE.)	
11. Check A NOTICE OF INT	Appropriate Box to Indicate I	Nature of Notice, Re	port, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT XX
PULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB
OTHER:		OTHER:	
SFF RULE 1103.			ding estimated date of starting any proposed
2/26/93 Unable to red	cover stuck 2-3/8" tbg	from 7924'-5130'	. Cmt'd in place w/lst plug.
Plug 2 50 s Plug 3 50 s Plug 4 60 s	sx H w/5 lb. gilsonite/ sx C sx C sx C sx C	4250'-4150' 2050'-1950' 20'-surf	(160') Tagged (100') Tagged (100') (20')
A . CC -131	and sot day hole m	marker. Well På	1 H 3/1/33.

Plug 5 Cut off wellhead and set dry hole marker. Well P & A 3/1/ I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE March 2, 1993 Agent SIGNATURE -TELEPHONE NO. 915/682-8217 TYPE OR PRINT NAME James E. Yeley (This space for State Use) ROZOR