STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION	-	
SANTA FE	\vdash	
FILE		
U.S.G.S.		
LAND OFFICE		
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OIL CONSERVATION DIVISION

DISTRIBUTION SANTA FE	P. O. BOX 2088	Form C-103	
FILE	SANTA FE, NEW MEXICO 87501	Revised 10-1-78	
U.S.G.S.	TICHT HALF	5a. Indicate Type of Lease	
LAND OFFICE	TIGHT HOLE	State Fee X	
OPERATOR		5. State Oil & Gas Lease No.	
SUNDRY NO	OTICES AND REPORTS ON WELLS		
USE "APPLICATION FO	IR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)		
· ·		7. Unit Agreement Name	
WELL XX WELL O	THER-		
·		8. Farm or Lease Name	
Sun Exploration & Product 3. Address of Operator	Cion Co.	Arreguy 25	
	T 70700	9. Well No.	
P. O. Box 1861, Midland,	Texas /9/02	1	
		10. Field and Pool, or Wildcat	
UNIT LETTER OIU	PEET PROM THE North LINE AND 510	Wildcat	
THE East LINE, SECTION	25 TOWNSHIP 15-S RANGE 34-E NAME		
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County	
	4035.5' Gr.	Lea	
Check Appro	opriate Box To Indicate Nature of Notice, Report or	Other Data	
NOTICE OF INTEN	TION TO: SUBSEQUE	ENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUE AND ASANDONMENT	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PEGG AND ABANDONMENT	
	отнея <u>Set 5-1/2 с</u> а	asing, New Well	
OTHER			
7. Describe Proposed or Completed Operation	ne (Clearly sees all		
work) SEE RULE 1103.	ns (Clearly state all pertinent details, and give pertinent dates, include	ing estimated date of starting any proposed	
10-15-87		·	
DUM 9 CMT FI ITC	F 7/00 750 W 50	•	
RUN & CMT 51 JTS 5-1/2" 17# K-55 BUTT, 149 JTS 5-1/2" 17# K-55 LTC			
U / 1 U I J J I / / 1/# N=AU 1 1 \			
THE COLOR DIGITIES AND THE PROPERTY OF THE PRO			
MUD FLUSH + 5 BBL 2% KCL WTR + 500 GALS AQUA-FIX + 5 BBLS 2% KCL WTR, WESTERN CMT 1ST STAGE W/1100 SXS CLASS H 50:50 POZ + 2% GEL + 0.5% CF-9 - 0.3% TF-4,			
CSG, ND BOP, NU	OOCOOOM CLUSE STAGE THIT AP CLI CLIDE ON	JT OFF 5-1/2"	
234, ND BOI, NO	· · ·		
RAN TEMPERATURE S	SURVEY, TOC 4400'		
	7011213 100 4400		
	·		
		•	
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. I hereby certify that the information above	is true and complete to the best of my knowledge and belief.		
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Maria Z. Pl	Accounting Associate	10 20 07	
		10-29-87	
ORIGINAL SIGNED BY JER	אסדאיילעב	NOV 2 4005	

1987

DISTRICT I SUPERVISOR