

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

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

WELL API NO.	30-025-31249
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	LG-0030 & LG-3974
7. Lease Name or Unit Agreement Name	
T.C.H. Ranch '6'	
8. Well No.	1-8
9. Pool name or Wildcat	Hume - Atoka Gas
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
4152 Gr.	

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Kaiser-Francis Oil Company
3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468	4. Well Location Unit Letter <u>X</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>6</u> Township <u>16S</u> Range <u>34E</u> NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4152 Gr.	

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Install a gas processing plant</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

This is notification of our intention to install a skid mounted unit consisting of a gas-to-gas heat exchanger, a gas chiller, a cold separator, a product stabilizer, a glycol regenerator, a vapor compressor and a product storage and loading unit. Refrigeration is supplied by a freon refrigeration system. Products from the storage tanks are to be loaded into pressurized transport trucks. The plant is designed to process 2000 MSCFD of natural gas.

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

SIGNATURE C. Van Valkenburg TITLE Technical Coordinator DATE 3/5/92
TYPE OR PRINT NAME Charlotte Van Valkenburg TELEPHONE NO. 918-491-4314

(This space for State Use)

APPROVED BY CHARLOTTE VAN VALKENBURG TITLE TECHNICAL COORDINATOR

DATE MAR 10 1992

CONDITIONS OF APPROVAL, IF ANY: