Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-33749

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mex		100 8/303	5. Indicate Type of Lease STATE	FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND (DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE (FORM C-101) FOR S	D DRILL OR TO DEEPEN **APPLICATION FOR PE	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	<i>.</i>
i. Type of Well: OIL GAS WELL X WELL	OTHER		Medlin	
2. Name of Operator			8. Well No.	
Amerind Oil Company Limite	<u>l Partnership</u>		9. Pool name or Wildcat	
3. Address of Operator	Midland. Texas	70701	Townsend Perino Upper Po	enn
415 West Wall, Suite 500	Midianu. Texas			
Unit Letter J :3625_ Feet Fro	m The North	Line and1875	Feet From The East	Line
Section 5 Townsh	p 16S R		impm Lea	County
	0. Elevation (Show whether	DF, KKB, KI, GK, etc.)		
Check Appropria	te Box to Indicate	Nature of Notice, Re	port, or Other Data	
NOTICE OF INTENTION		SUBS	SEQUENT REPORT OF:	
			ALTERING CASING	Г
PERFORM REMEDIAL WORK PLUG	AND ABANDON L	REMEDIAL WORK		_
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL		COMMENCE DRILLING	OPNS. PLUG AND ABANDO	NMENT L
PULL OR ALTER CASING		CASING TEST AND CEN	MENT JOB L	
OTHER:		OTHER:		[
12. Describe Proposed or Completed Operations (Clearly	more all persinent details	and sive pertinent dates, inclu	ding estimated date of starting any proposi	ed
work) SEE RULE 1103.	suite dis personale di di		•	
2-27-97 Set CIBP @ 12,325' plus	s 4 sx cmt.			
2-28-97 Perf'd 5-1/2" csg. from 1		oles) & 11,526'-11,54	5' (20 holes). TIH	
w/2-7/8" tbg. Set pkr @				
3-08-97 Acidized w/3000 gals. 1:) ball sealers.		
3-19-97 Set CIBP's @ 11,354' a 3-20-97 Perf'd 5-1/2" csg. from 1	-	1 262'-11 284' (37 ho	ac)	
3-21-97 TIH w/2-7/8" tbg. Set p	·	11,202 -11,204 (37 No.		
3-26-97 Acidized w/3000 gals. 13	•	ill sealers.		
NOTE: Well name changed to Mediin not communitized and not or	· · · · · · · · · · · · · · · · · · ·	lin State Com No. 1) be	cause completed zone is	
I hereby certify that the information above if true and complete to			7/10/	'no
SIGNATURE WHITE		General Partne	pare	<u> </u>
TYPEORPRINTNAME Robert C. Leibrock	·		TELEPHONE NO. (915) 682-8217	
1 11 2 4/1 1 1/1 1/1 1/1 1/1 1/1 1/1 1/1 1/1 1				

(This space for State Use)

Min Williams

DISTRICT 1 SUPERVISOR

DATE 41998