

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.	30-025-33763
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	A.J. #6
8. Well No.	1 96838
9. Pool name or Wildcat	Wildcat

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 Rand Paulson Oil Company, Inc.
3. Address of Operator 508 W. Wall Suite 100 Midland, Texas 79701	4. Well Location Unit Letter R : 1980 Feet From The EAST Line and 1980 Feet From The South Line Section 6 Township 16-S Range 35-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4055'

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: <input 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.

1. CIBP ALREADY SET @ 12,350 W/ 35' CMT. DATE 7-16-97
TAG PLUG, CIRC HOLE W/ 9.5" MUD

2. CUT & Pull 5 1/2 CSG @ ±9500' - SPOT 4 SX ON STUB - WOC & TAG

3. SPOT 40 SX @ 6500', WOC & TAG

4. SPOT 50 SX @ 4650', WOC & TAG 8 5/8" SHOE PLUG

5. SPOT 35 SX @ 1600', SPOT 35 SX @ 450'

6. SPOT 10 SX @ SURFACE, CUT OFF WELL HEAD - INSTALL Dry Hole MARKER

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

SIGNATURE Bob Schmucker TITLE AGENT DATE 1/19/98

TYPE OR PRINT NAME BOB SCHMUCKER TELEPHONE NO. 915/697-0752

(This space for State Use) ORIGINAL SIGNED BY CHIEF OF DIVISION
DISTRICT III

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JCI

je
dp