Submit 3 Copies To Appropriate Distri Office	51410 01	New Me		Form C-103 Revised March 25, 1999		
District 1 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals	and inatu	rai Resources	WELL API NO.		
District II				30-025-34681		
811 South First, Artesia, NM 88210 District III	-	outh Pach		5. Indicate Type of	of Lease	
1000 Rio Brazos Rd., Aztec, NM 8741	^			STATE C		
District IV 2040 South Pacheco, Santa Fe, NM 87505 Santa Fe, NM 87505				6. State Oil & G	as Lease No. A-1320	
	OTICES AND REPORTS O	N WELLS	······································		or Unit Agreement	
(DO NOT USE THIS FORM FOR PR DIFFERENT RESERVOIR. USE "AI PROPOSALS.)	OPOSALS TO DRILL OR TO DEE	PEN OR PLU	JG BACK TO A	Name: New Mexico –EQ	-	
1. Type of Well: Oil Well 🖾 Gas Wel	i 🗔 Other					
2. Name of Operator				8. Well No. 2	· · · · · · · · · · · · · · · · · · ·	
	СКО					
3. Address of Operator				9. Pool name or V		
and the second se	t. Suite 118, Midland. Texas	79705-610	4	Townsen	u Suawn	
4. Well Location						
Unit LetterA	_:990'feet from the	N	line and990			
Section 16	Township	16S F	Range 35E	NMPM La	a County	
	10. Elevation (Show			tc.)		
		4004' GF		Dente Out	Dete	
11. Che	ck Appropriate Box to Ir	ndicate N	ature of Notice,	Report or Other		
NOTICE OI	FINTENTION TO:		REMEDIAL WO		ALTERING CASIN	G 🗆
PERFORM REMEDIAL WORK		N L	REMEDIAL WO		ALTERNITO ONO	• —
TEMPORARILY ABANDON			COMMENCE DF		PLUG AND ABANDON MENT	
PULL OR ALTER CASING			CASING TEST A	AND 🖾		
OTHER:			OTHER: Squee			X
12. Describe proposed or con of starting any proposed v or recompilation.	npleted operations. (Clearly vork). SEE RULE 1103. For	state all pe r Multiple	rtinent details, and Completions: Atta	l give pertinent dates, ich wellbore diagram	including estimated of proposed complet	date tion
	1007					
Set cement retainer at 11,-	00 . m 11,436 – 11,540' KB with	100 sxs C	ass -H- cement.			
Final pump pressur 1600						
Reversed 3-1/2 bbls of cer						
WOC 24 hours.	1					
Drilled cement and cleane	d-out well to 12,420° KB.					
Tested casing to 1750 psi Well ready to recomplete	to Morrow.					
with rough to roomproto						
		mlate to the	hort of my knowle	edge and belief	<u>,</u>	
I hereby certify that the inform	nation appress true and com	piece to me	OCSI OL IIIY KIIOWI	and and center.		
SIGNATURE	Thomas	TITLE	President	DATE_	03/23/2000	
SIGNATURE						1
Type or print name Steve	L. Thomson			Telepho	ne No. 915-686-012	1
(This space for State use)				1 2010-07-8 1 2010-07-8		
•		TITLE			ABATE 2000	
APPPROVED BY Conditions of approval, if any	у.					
Conditions of approval, if all	, .					
				·^		
				X-1	a Strawn	
			フロ	Townson	a Strawn	
					$\tilde{\mathbf{v}}$	

		¥	1.
ZR	. T	ownsend	Hrawn



. 61.81

HUM 2000 Hobbs Hobbs OCD

1