State of New Mexico Energy, Minerals and Natural Resources Department

Form	C-1	03	3
Revise	ed :	1-1	-89

DISTRICT I OIL CONSERVAT	ION DIVISION	F			
P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-025-34684			
DISTRICT II. P.O. Drawer DD, Artesia, NM 88210	01000	sIndicate Type of Lea	ase		
			STATE FEE		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		₅State Oil & Gas Lea 17569	se No.		
SUNDRY NOTICES AND REPORTS ON WE	ELLS	70 162 46	·····································		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPE DIFFERENT RESERVOIR. USE "APPLICATION FOR P	7Lease Name or Uni	t Agreement Name			
(FORM C-101) FOR SUCH PROPOSALS.)		West Lovington	Strawn Unit		
Type of Well: OIL GAS WELL OTHER		AMAII AL-			
₂ Name of Operator Gillespie Oil, Inc.		₅Well No. 14			
₃Address of Operator		Pool name or Wildo			
P.O. Box 2557, Midland, Texas 79702 Well Location		Lovington Strav	WII, VVCSL		
Unit Letter E : 610 Feet From The West	Line and1830	Feet From The	North Line		
33 Section 15S Township 35E	Range	NMPM	Lea County		
Discrepancy of the control of the co	F, RKB, RT, GR, etc.)				
11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO:	SEQUENT RE	EPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING C	COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT			
PULL OR ALTER CASING CASING TEST AND CEM		ENT JOB X			
OTHER:	OTHER:				
12Describe Proposed or Completed Operations (Clearly state all pertinent details, and gwork) SEE RULE 1103.					
10/02/99 Finished 11" hole to 4746'. Start running 8-5/8" csg.					
10/03/99 Finished running 117 hts 8-5/8" 32#, J-55 & M-80 csg to 4 by 200 sxs class "C" w/1% CaCl2. Plug down @ 11:53 AM 10/02/99 PU & RIH w/7-7/8" bit. Test csg & BOPs to 1500 psi. OK. Drill out of	3. Circ 300 sxs to pits. I	ND BOPS. Set slip	IS, CUT OT CSG. NO BOPS.		
	dedge and helief				
I hereby certify that the information above is true and complete to the best of my know SIGNATURE	vledge and belief. TITLE Production Manag	jer	DATE 10-05-99		
TYPE OR PRINT NAME Mark Mladenka			тецерноме мо. (915)683-1765		
(This space for State Use) ORIGINAL SIGNET SAY					
GARY WEST			建		
APPROVED BY	TITLE		DATE		
CONDITIONS OF APPROVAL, IF ANY:					