DISTRICT I

OIL CONSERVATION DIVISION

1625 N. FRENCH DRIVE, HOBBS, NM 88240	310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503			TELL ADDAY			
			b '	WELL API NO. 300250 546 400 5. Indicate Type of Lease			
			1				
				FED	STATE	FEE	X
				6. State Oil & Gas Lease No			
SUNDRY NOTICES AND	REPORTS ON W	FILS		ile vistation surs	(in 1771-1712) (in 1771-1712)		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A							
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7. Lease Name or Unit Agreement Name			
(FORM C-101 FOR SUCH PROPOSALS.)				NORTH HOBBS (G/SA) UNIT			
1 Type of Well							
Oil Well X Gas Well	(Mar. 1)						
2. Name of Operator ALTURA ENERGY LTI	1 1			ECTION 23			
, and the second pro-	.,		8	. Well No	311		
3 Address of Operator 1017 W STANOLIND F	21)					_	
1017 (1 317.4(7).1,4(7)(1)				9. Pool name or Wildeat			
			11	OBBS (G/S	A)		
4 Well Location							
Unit Letter B 330 Feet From	The NORTH	Line and 1650	Feet Fre	m The	EACT	T :	
	-	1030			EAST	Line	
Section 23 Tow	nship 18-S	RANGE	37-1	NMP	ч	LEA County	
10 Elevation	on (Show whether DF)	RKB, RT GR, etc.)				LEA County	
3686, DI	:	,					
11 Check Appropriat	e Box to Indicate	Nature of Notice, F	3				
NOTICE OF INTENTION TO)	l					
			SUBSEC	QUENT RE	PORT OF		
PERFORM REMEDIAL WORK PLUG AND .	ABANDON	REMEDIAL WORK			ALTERING	CASING	
TEMPORARILY ABANDON CHANGE PL	ANS	COMMENCE DRILL	LINICE CADATE				
PULL OR ALTER CASING					PLUG & AE	BANDONMENT	L
		CASING TEST AND	O CEMENT 10	ж 🔙			
OTHER		OTHER MEP	70				
12. Describe Proposed or Completed Operations (Clausely et al.							L
12. Describe Proposed or Completed Operations (Clearly statework). SEE RULE 1103.	с ай регипені астаня,	and give pertinent date.	s, including e	dimated date	of starting any	proposed	
TEST DATE 04/03/99							
PRESSURE READING 340 PSI							
LENGTH OF PRESSURE READING 30 MIN							
TEST WITNESSED NO							
		Maria de la Compania del Compania de la Compania de la Compania del Compania de la Compania de l		es 25 & 2134			
This Approval of the state of					5-11	- 20DL	
		Mandormant	rxpires		21		
Thereby certify that the information above is true and complete	e to the best of my know	ledge and belief.		1			
SIGNATURE JULY 11 St.	61 +			1			
SIGNATURE Xobert 11. Zi	Kem	TITLE LIFT SP	<u>ECIALIST</u>		DATE	04-06-99	
TYPE OR PRINT NAME R N. GILBERT				TULE	DHONENO		
(This space for State Use)				TELE	PHONE NO.	505/397-8206	
(This space for state Cse)	f						
APPROVED BY	TITLE				• -1-1-		
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