

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- 05464
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	
North Hobbs G/SA Unit Sec. 23	
8. Well No.	311
9. Pool name or Wildcat	Hobbs; Grayburg-San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3686' DF	

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	Altura Energy LTD
3. Address of Operator	P.O. Box 4294, Houston, Texas 77210-4294
4. Well Location	Unit Letter B 330 Feet From The North Line and 1650 Feet From The East Line
Section 23	Township 18-S Range 37-E NMPM Lea County

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <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: 'TxA Status' <input checked="" 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.

Test Date: 7/7/97
Pressure Reading: 555 psi
Length of time pressure held: 30 min.
Test Witnessed: No

This Approval of Temporary Abandonment Expires 4-2002

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

SIGNATURE	Mark Stephens	TITLE	Business Analyst (SG)	DATE	8/27/97
TYPE OR PRINT NAME	Mark Stephens	TELEPHONE NO.	(281) 366-7335		

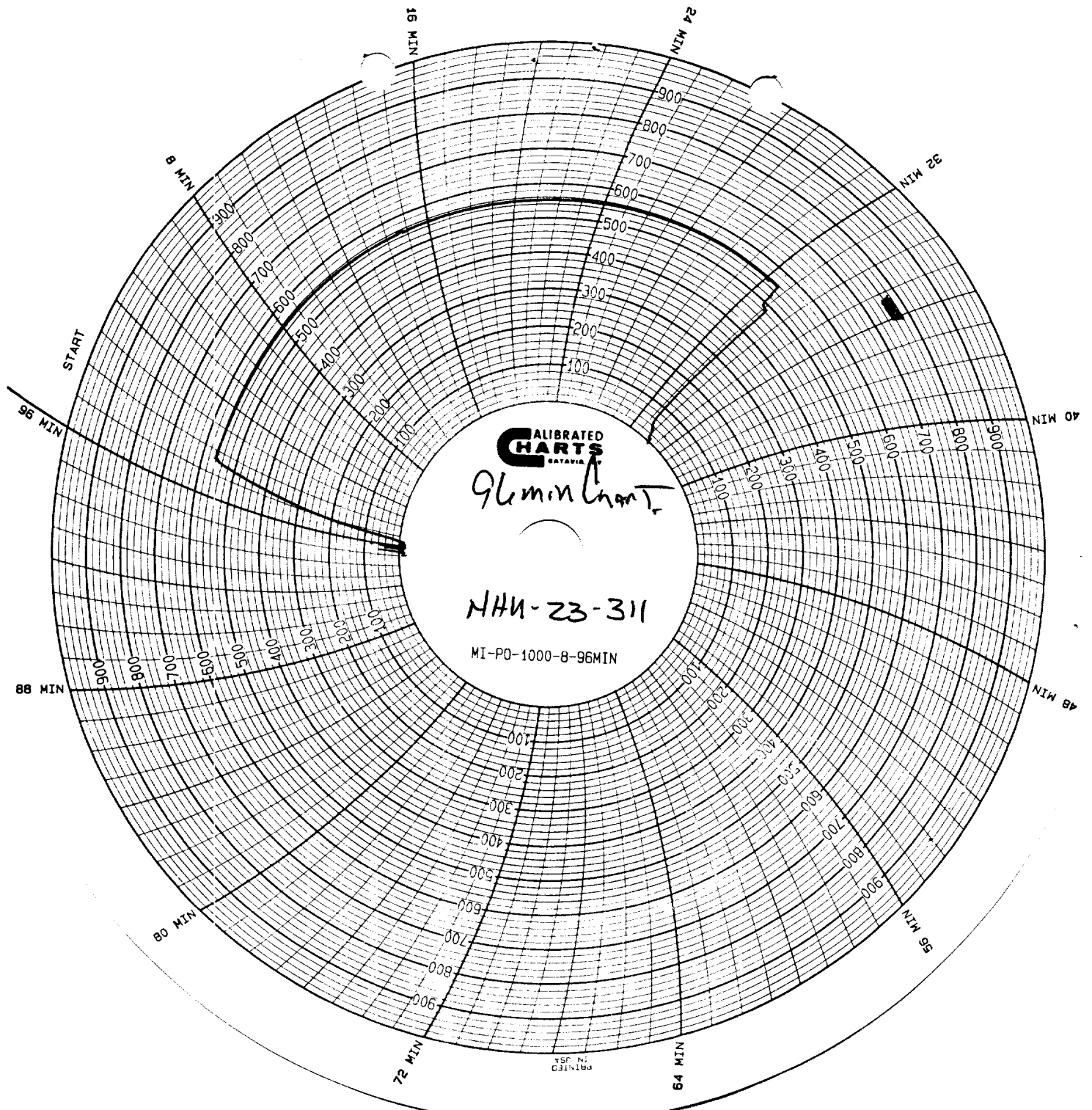
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ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY		TITLE		DATE	SEP 4 1997
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CONDITIONS OF APPROVAL, IF ANY:

JCSG



NHU

23-311

Mike Hamy

7-7-97

Pate Trucking