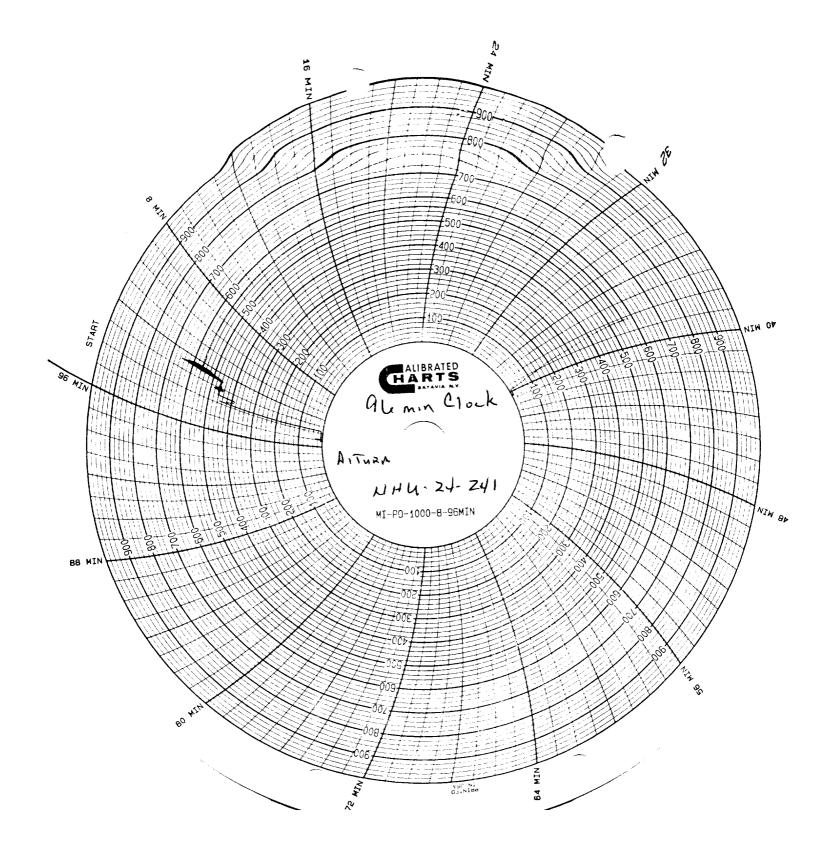
DISTRICT I

OIL CONSERVATION DIVISION

	0.2 0002		
1625 N. French Drive , Hobbs, NM 882-	JIO Old Saula	Fe Trail, Room 206	WELL API NO. 30-025-3 5011-
	Santa re, Ne	ew Mexico 87503	5. Indicate Type of Lease
			FED STATE X FEE
			6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			
(DO NOT USE THIS FORM FOR I DIFFERENT RES	PROPOSALS TO DRILL OR TO DEEP! SERVOIR. USE "APPLICATION FOR I	EN OR PLUG BACK TO A PERMIT"	7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT
(FOR	M C-101 FOR SUCH PROPOSALS.)		NORTH HOBBS (G/SA) UNII
Type of Well: Oil Well	Gas Well Other 7		SECTION 24
	Gas Well Other 7 DENTAL PERMIAM, LTD.	ΓA'd	8. Well No. 241
3. Address of Operator 1017 V	V STANOLIND RD.		9. Pool name or Wildcat
•			HOBBS (G/SA)
4. Well Location			
Unit Letter N : 330	Feet From The SOUTH	Line and 2310 Feet	From The WEST Line
Section 24	Township 18-S	Range 37-E	NMPM LEA County
	10. Elevation (Show whether DF, I		NMPM LEA County
	3664' GL		
11. Che NOTICE OF IN	Eck Appropriate Box to Indicate		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		EQUENT REPORT OF:
TEMPORARILY ABANDON	CHANGE PLANS	REMEDIAL WORK	ALTERING CASING
PULL OR ALTER CASING	CHANGE FLANS	COMMENCE DRILLING OPN	
OTHER:		OTHER: REPAIRED FAILED MIT	
	tone (Clarate state all and a state all		
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (C learly state all pertinent aetails, .	and give perlinent dates, including	g estimated date of starting any proposed
REPAIRED SURFACE LEAK @136	53' - 1374'. CEMENT SQZ W/300) SKS.	
REPLACED WELL HEAD. TEST CSG TO 560 PSI FOR 30 MIN AND CHART FOR THE NMOCD.			
CIRC CSG W/INHIBITED FLUID.			
WELL IS TEMPORARILY ABAND	ONED		
WELL STEEL CHARLES	.MIM)		
RIG UP DATE:	06/07//00	This knows at a	Tambana maray
SUSPENDED JOB/RIG DOWN RESUME JOB/RIG UP	06/08/00 06/13/00	This Approval of Theoretoment Expir	
RIG DOWN	06/15/00	1995 Charles Comment of Christing Co.	
I hereby certify that the information above is	true and complete to the best of my know	ledge and belief.	
SIGNATURE		TITLE DOWNHOLE SP	PECIALIST DATE 07/11/2000
TYPE OR PRINT NAME R.N. GILBI	ERT		TELEPHONE NO. 505/397-8206
This space for State Use)	<u> </u>		5031391-6200
APPROVED BY	TITLE		DATE
	THE ,		DATE THE COURT

N





Received Hotos OCD STATE STATE