## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OII COI	NGEDI	ATTON	DIVICIO	<b>33</b> 7		]	Revised 1	-1-89	
DISTRICT I	OIL CO			DIVISIC	JIN T	WELL API NO				
P.O. Box 1980, Hobbs, NM 88240	2040 Pacheco St. Santa Fe, NM 87505					30-025-05485				
DISTRICT II						5. Indicate Typ	e of Lease			
811 S. 1st Street, Artesia, NM 88210						FED	STATE	X	FEE	
DISTRICT III						6. State Oil & 0	Gas Lease No.			
1000 Rio Brazos Rd, Aztec, NM 87410								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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 CARD FOR SUCH PROPOSALS )						7. Lease Name or Unit Agreement Name				
(FORM C-101 FOR SUCH PROPOSALS.)  1. Type of Well:						NORTH HOBBS (G/SA) UNIT				
Oil Well X	Gas Well	Other								
2. Name of Operator						8. Well No.	141	-		
ALTURA ENERGY LTD.										
3. Address of Operator						9. Pool name o	Wildeat	HOBB	S (G/SA)	)
1017 W. Stanolind Rd., HOBBS, NM	88240	505/39	7-8200							
Unit Letter M : 1315	Feet From The SC	DUTH	Line and	1315	Feet ]	From The	WEST	Line		
Section 24	Township	18S		Range	37E	NMP	M	LEA	County	
	10. Elevation (Show who	ether DF, RF	KB, RT GR, ei	c.)						
	3668 GL									
	ppropriate Box to Ir	ndicate Na	ature of No				EDODE OF			
NOTICE OF INTEN	TION TO:			,	SOBSE	EQUENT R	EPORT OF	:		
PERFORM REMEDIAL WORK X P	PLUG AND ABANDON		REMEDIA	AL WORK			ALTERING (	CASING		
TEMPORARILY ABANDON C	CHANGE PLANS COMMENCE DRILLING OPP					NS. PLUG & ABANDONMENT				
PULL OR ALTER CASING	CASING TEST AND CEMEN									
OTHER:			OTHER:							
										L
12. Describe Proposed or Completed Operations (C SEE RULE 1103.	'learly state all pertinent	t details, and	d give pertine	nt dates, inclu	iding esti	mated date of st	arting any propos	ed work)		
1. Drill out CIBP at 4210.										
2. Stimulate Openhole 4218-4270.										
3. Run production equipment.										
<i>(</i> .										
I hereby certify that the information poore is true a	nd complete to the best o	f my knowle	dge and belie	f.						
SIGNATURE ( )	/\		TITLE	PROD EN	NGR		DATE	7-	7-02	う
TYPE OR PRINT NAME D. NELSON			_			TEI	LEPHONE NO.	505/3	97-8200	
(This space for State Use)										
APPROVED BY			TITLE				DATE			

CONDITIONS OF APPROVAL IF ANY:

