

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: _____ Name of Operator: _____ Address of Operator: <u>ALPHA TWENTY-ONE PRODUCTION CO.</u> <u>P.O. BOX 1206 Jal, New Mexico</u> Location of Well: _____ UNIT LETTER <u>J</u> , 1980 FEET FROM THE <u>South</u> LINE AND 1980 FEET FROM THE <u>East</u> LINE, SECTION <u>32</u> TOWNSHIP <u>18-5</u> RANGE <u>37-E</u> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) _____ 12. County <u>Lea</u>		7. Unit Agreement Name _____ 8. Farm or Lease Name <u>Mike</u> 9. Well No. <u>2</u> 10. Field and Pool, or Wildcat <u>Current</u>
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

FORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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.

We have temporarily shut this well in while trying to clear up some details. We are presently planning to do remedial work on this well in the future.

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

<u>Michael D. Oney</u> Michael D. Oney State W. Secy BY <u>Oil & Gas Inspector</u>		TITLE <u>Drilling Superintendent</u> DATE <u>AUG - 8 1984</u>
CONDITIONS OF APPROVAL, IF ANY: <u>Expiry 8/8/85</u>		DATE _____