

DISTRICT I

1625 N. Fifth Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.	300250553900
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)

1. Type of Well:	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJECTOR
2. Name of Operator	ALTURA ENERGY LTD.
3. Address of Operator	1017 W STANOLIND RD.

7. Lease Name or Unit Agreement Name	NORTH HOBBS (G/SA) UNIT
SECTION	36
8. Well No.	411
9. Pool name or Wildcat	HOBBS (G/SA)

4. Well Location	Unit Letter <u>A</u> <u>330</u> Feet From The <u>NORTH</u> Line and <u>330</u> Feet From The <u>EAST</u> Line
	Section <u>36</u> Township <u>18-S</u> <u>37-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3658' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <u>T & A STATUS</u> <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: 05/27/99

RUSCHLUMBERGER. SET CIBP @3960'.

CHART FOR THE NMOCID.

PRESSURE READING: 520 PSI.

LENGTH OF PRESSURE READING HELD: 30 MIN.

TEST WITNESSED: NO.

**This Approval of Temporary
Abandonment Expires**

06-21-2004

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

SIGNATURE Robert N. Gilbert TITLE LIFT SPECIALIST DATE 06/07/99
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206
(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TITLE DATE

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