## Form C-103 Revised 1-1-89

## State of New Mexico Ei Minerals and Natural Resources Departmer

DISTRICT I

## OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88240	310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503		WELL API NO. 30 - 025 - 0	07362
			5. Indicate Type of Lease	
			FED STATE	FEE X
			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"			7. Lease Name or Unit Agreement Name	
(FORM C-101 FOR SUCH PROPOSALS.)			NORTH HOBBS (G/SA) U	JNH
Type of Well:     Oil Well X Gas Well Other			_	
	Gas Well Other A ENERGY LTD.		8. Well No. 19-231	
1017 W STANOI DID DD			D. D. William	
3. Address of Operator 1017 W STANOLIND RD.			9. Pool name or Wildcat HOBBS (G/SA)	
4. Well Location				
Unit Letter K : 2310	Feet From The SOUTH	Line and 2310 Feet	t From The WEST	Line
Section 19	Township 18S	38E	NMPM	LEA County
	10. Elevation (Show whether DF, 13655) GL	RKB. RT GR. etc.)		
Check Appropriate Box to Indicate Nature of Notice, Report. or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	
TEMPORARILY ABANDON X CHANGE PLANS COMMENCE DRILLING OP				BANDONMENT
PULL OR ALTER CASING	<del></del>	CASING TEST AND CEMEN	T JOB	
OTHER:		OTHER:		
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.				
POH W/PROD EQUIPMENT.				
RIH W/7 CSG SCRAPER TO 3925. ** TOP OF 5.5" LINER @ 3931. SET 7" CIBP @3880". (TOP PERF @4062")				
TEST CSG TO 500 PSI FOR 30 MIN AND CHART FOR THE NMOCD.				
CIRC CSG WITH INHIBITED FLUID.				
POH WITH TBG.				
NOTIFY THE NMOCD 24 HR BEFORE CSG TEST.				
	,			
I hereby certify that the information above is	irue and complete to the best of my know	wledge and belief.		3-3-98
SIGNATURE Actual //.	Hilfret	TITLE LIFT SPECIALI		*
TYPE OR PRINT NAME R.N. GILBE			TELEPHONE NO.	505/397-8206
(This space for State USE) GINAL SIGNED	) BY CHRIS WILLIAMS I SUPERVISOR			
APPROVED BY	TITLE		DATE	