Submi Copies To Appropriate District	State of New Mexico			Form C-103		
Office	Energy, Minerals and Natural Resources			Revised March 25, 1999		
District I 1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION				30-025-28083 5. Indicate Type of Lease		
District III	1220 South St. Francis Dr.				STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Sania ee Mivi o / 100			6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM 87505				SwD 119		
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agreement Name:		
(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.)				State	'AJ'	
1. Type of Well:						
Oil Well Gas Well Other SwD 2. Name of Operator				8. Well No.		
BASIN AlliANCE LLC				#/		
3. Address of Operator P.O. Box 1378 Hobbs, NM 88241				9. Pool name or Wildcat DEVONIAN		
4. Well Location	,					
Unit Letter G	2310 feet from the	e Nor	th_line and 2	310 _feet fro	m the EAST lin	e
Section 33	Township	1 85 R	ange 36E	NMPM LEA	County	
Section 33	10. Elevation (Show	whether D			·	
	3806 G	<u>R</u>	CNL	Daniel Other	Dete	
11. Check A	ppropriate Box to I	ndicate N	ature of Notice,	Report of Other SEQUENT RE	Data DODT OF:	
NOTICE OF INTENTION TO: SUB- PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR					ALTERING CASING	
PERFORM REMEDIAL WORK	FEOG AND ADAINDO					
TEMPORARILY ABANDON				ILLING OPNS.	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOB	ND		
OTHER: Ropair tubi	ig leak	SE,	OTHER:			史
12 Describe proposed or complet	ed operations. (Clearly	state all pe	rtinent details, and	give pertinent dates,	, including estimated da	te
of starting any proposed work) or recompilation.	. SEE RULE 1103. Fo	or Multiple	Completions: Attac	ch wendore diagram	. or proposed completion	11
4/25/01 Moved Rigin, Ri	gged up. Nippli	s down	WELL hend.	UNSUNTED PI	acker. Pull 56,	h
found hold in tubi						
tested they to 500						
of 8 bad sts. R	edown tester	25 ~ 101	le up well	hand . Pump	73 hble PKR FI	- 1
unset PKR w/ Pu	mp 137 BBLS.	SET P	KR W/18000	Compression	ا است جمد دولات ا	
LOAD CASING W/70	more bols. Te	ist to	300 DS 1	- W P 1 63346	~ FIANGE WEIL	Ab
.			T -			
I hereby certify that the information	n above is true and con	plete to the	best of my knowle	dge and belief.		
SIGNATURE Anaege					DATE <u>4-26-0</u>	<u>) [</u>
Type or print name Hugo	NAFAELE T	· R .		Tele	ephone No. 397- 59	89
(This space for State use)	INVOADIR 1					
-		TITI D			DATE	
APPPROVED BY Conditions of approval if any:		111FE				



