## State of New Mexico Er

, Minerals and Natural Resources Departmer

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATI	ON DIVISION	WELL API NO.
DISTRICT II	DISTRICT II P.O. Drawer DD. Artesis, NM, 88210  310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503		30-025-29057
P.O. Drawer DD, Artosia, NM 88210 DISTRICT III		aco 8/303	5. Indicate Type of Lease STATE FEE XX
1000 Rio Brazos Rd., Azzec, NM 87410	)		6. State Oil & Gas Lease No.
SUNDRY NO	TICES AND REPORTS ON WE	us .	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS 1			7. Lease Name or Unit Agreement Name
I. Type of Well: OIL X WELL X WELL	OTHER		Viersen /
2. Name of Operator Morris R Antweil			8. Well No.
3. Address of Operator			0 Part
c/o Johnson, Miller 4. Well Location	& Co. PO Box 220 Hobbs	NM 88241	9. Pool name or Wildcat Wildcat
Unit Letter P : 990	Feet From The south	Line and330	Feet From Theeast Line
Section 30	Township 18s R	<b>mge</b> 39e 1	NMPM Lea County
	10. Elevation (Show whether 3609.2 GR	DF, RKB, RT, GR, etc.)	
11. Check	Appropriate Box to Indicate	Nature of Notice, Re	COORL OF Other Data
NOTICE OF IN	TENTION TO:	SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL ORALTER CASING	<del></del> -	CASING TEST AND CEN	
OTHER:		OTHER:	
12. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all pertinent details, a	nd give pertinent dates, inclu	ding estimated date of starting any proposed
6/22/02 4			
6/22/93 Moved in rig Set CIBP at 7	to start plugging.		
Tumped 25 3X.	080', capped with 35' of Cemment at 4500'. Cut	7" casing at 22	ud to 4000'
141164 (0 109	O' DUDO UD COULAN'E	ut 10000	
1agged shoe 9 6/28/93	5/8 casing, salt plug	at 1426'. Pumpe	d surface plug. Completed
.,,			
I hereby certify that the information above is true a	of complete to the buff of my importance and ball	<u> </u>	
SIGNATURE Muse	Wohlen		1/15/48
TYPEOR PRINT NAME Elliott	Johnson / Johnson, Mill		DATE
(This space for State Use)  ORIGINA	L S'GVED BY	E1 G UU	TELEPHONE NO.
Gag	NED BY		714 717 1895
APPROVED BY	THEP II		DATE
	***************************************	<del></del>	- DAIL -

APPROVED BY-CONDITIONS OF AFTROVAL, IF ANY: