to Appropriate District Office	Energy berals and l	Natural Re	sources Department	1	Form C-103 Revised 1-1-89
DISTRICT I P.C. Box 1980, Hobbs, NM 88240	OIL CONSERV			WELL API NO.	
DISTRICT II	P.O. Santa Fe, New	. Box 208 Mexico			25-31187
P.O. Drawe: DD, Artesia, NM 88210 DISTRICT III				5. Indicate Type of	Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas	
( DO NOT USE THIS FORM FOR PF DIFFERENT RESE	TICES AND REPORTS ROPOSALS TO DRILL OR TO ERVOIR. USE "APPLICATION C-101) FOR SUCH PROPOS	deepen N For Per	OR PLUG BACK TO A	7. Lease Name or U	nit Agreement Name
1. Type of Well:				_	- "I I"
WELL XX WELL [	WELL OTHER			Buffalo Wallow State	
Siete Oil and Gas Corp	oration			8. Well No.	1
<ul> <li>Address of Operator</li> <li>P.O. Box 2523, Roswell</li> <li>Well Location</li> </ul>	, NM 88202-2523			9. Pool name or Wil Wildcat Si	
Unit Letter F 19	80 Feet From The N	orth	Line and 1	980 Feet From T	he West Line
Section 1	Township 18S	Ran	<b>se</b> 35E	NMPM L	ea County
	10. Elevation (Sho	w whether L	F, RKB, RT, GR, etc.)		
1. Check	Appropriate Box to Ir	idicate N	ature of Notice R	eport or Other I	//////////////////////////////////////
NOTICE OF IN	TENTION TO:			SEQUENT RE	
	PLUG AND ABANDO	N 🗆	REMEDIAL WORK		
MPORARILY ABANDON	CHANGE PLANS			OPNS.	
ILL OR ALTER CASING			CASING TEST AND CE		
HER:			OTHER:	test Delawar	e formation X
2. Describe Proposed or Completed Operativeski) SEE PULE 1103	ations (Clearly state all pertinent	t details, and	give pertinent dates, inclu	ling estimated date of st	arting any proposed
work) SEE RULE 1103. 10/14/91 RU & perfed					
	UKE W .Z BPM @ 2/(	JU DS1.	ODEN DVDASS.	spot 500 gale	15% HCl +o
DKr, Close D	vdass, tormation i	nribaat	6 5 RDM 6 201	50 nci braka	+- 2100 0
tbg to remove	400 psi @ 2.5 BPM e setting tool, pu	, IUH w ump 10	/pkr, llH w/ret bbls H20 space	tainer & set	0 5778', RT
TURNALIUN TEN	eaina @ 350 psi @	2.6 BP	MW/50 sys in t	formation con-	trol proceurs
on csg to ma	intain 1500 psi or	i csa.		na out of ret:	ainor TOH
	retainer @ 5778.	pressu	re test nerfs (	a 5750'_60' w	4881', began drlg c
ok, uni real	iner a cmt, trip t	to 5935	', circ hole cl	lean, test per	fs 5812'-36.5'
to 1000 psi,	bled off in 5 mir	n, SION	•		
bereby certify that the information above is true	and complete to the best of my know	wiedge and he	lief.		
$\Lambda$ , $\alpha$	tley-Seller	TITLE		hnician	DATE 7/31/92
	T T				DATE/31/92
YPE OR PRINT NAME	<u> </u>				TELEPHONE NO.
This space for State Use) ORIGINAL SIGNEI	) by Jeary Sexton				
PPROVED BY DISTRICT	SET WEEK SEXPON	TTILE			AUG 0 4 '9
DNDITIONS OF APPROVAL, IF ANY:					· ·

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