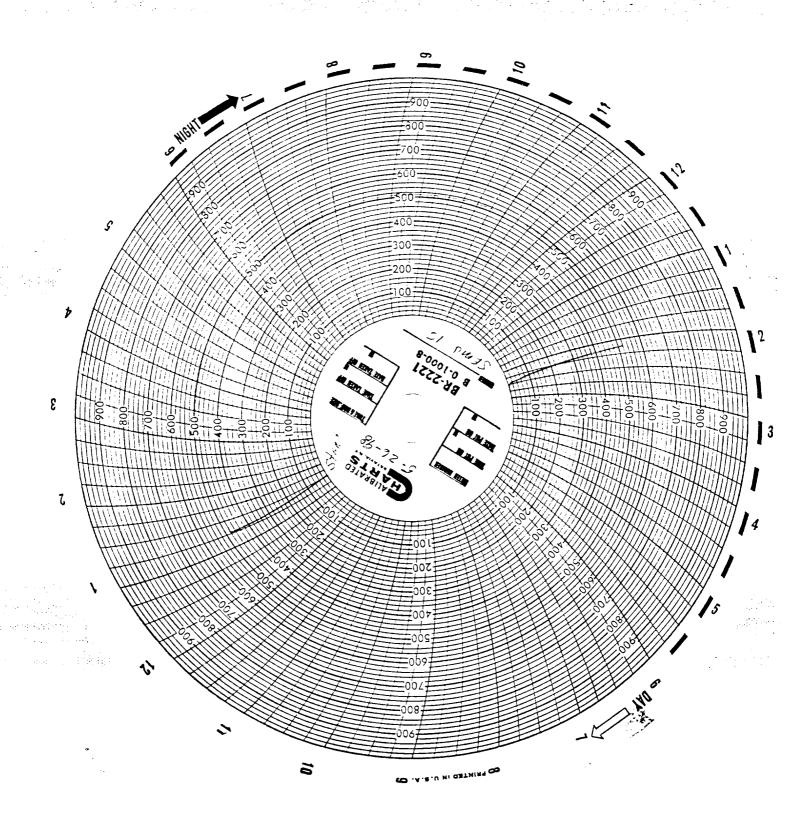
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION 2040 Pacheco St.					WELL API NO.		
Santa Fe NM 87505					30-025-33615		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210					sIndicate Type of Lease		
DISTRICT III						STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 87410					State Oil & Gas Leas	e No.	
SUNDRY NO	OTICES AND REPO	ORTS ON WE	LLS				
(DO NOT USE THIS FORM FOR F DIFFERENT RES (FORM	7-Lease Name or Unit Agreement Name SEMGSAU						
Type of Well: OIL GAS WELL WELL		other Water In	niector				
2Name of Operator					₃Well No.		
Cross Timbers Operating Comp Address of Operator	Pool name or Wildcat						
3000 N. Garfield, Suite 175, Midland, TX 79701					Maljamar Grayburg-San Andres		
4Well Location					•	,-	
Unit Letter D : 500	Feet From The	North	Line and _	330	Feet From The	West	Line
Section 32	Township	17S	Range	33E	NMPM	Lea	County
		(Show whether DF GR	, RKB, RT, GR, e	tc.)			
11 Check	Appropriate Box t	to Indicate N	ature of No	tice, Re	port, or Other D	ata	
NOTICE OF	INTENTION TO:			SUBS	SEQUENT RE	PORT OF	= ;
PERFORM REMEDIAL WORK PLUG AND ABANDON R			REMEDIAL W	REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS			COMMENCE	COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT			
PULL OR ALTER CASING CASING TEST AND CEM				T AND CEME	ENT JOB		
OTHER: OTHER: Convert to V				ater Injection Well		X	
Per Administrative or Describe Proposed or Completed Opera work) SEE RULE 1103. Rigged up pulling unit. Installed packer on 2-3/8" internally plass Installed wellhead. Press teste injection on May 26, 1998 at an PER ADMINISTRATIVE ORDE	d BOP. Pulled and latic coated tubing. Pulled tubing/casing annulated rate of 89	aid down rods, umped packer ulus to 500 psig	pump & prod fluid in annulu g. Held OK (c	uction tub	ing. Ran nickle p	lated Arrows 1287'. Remo	ved BOP.
I hereby certify that the information above	(1) -			Tash		06.4	04.00
SIGNATURE James Coursely TITLE Regulatory				ny rech		DATE 06-0	
TYPE OR PRINT NAME Janice Courtne	<u> </u>					TELEPHONE NO.	915/682-8873
(This space for State Use) ORIGINAL S DIST	SIGNED BY CHRIS V FRICT I SUPERVISC	PR					JUN 0 8 19
		т	TITLE			DATE	
CONDITIONS OF APPROVAL, IF ANY:							

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