State of New Mexico Eners,, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.
DISTRICT II			30-025-33968
P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Lease STATE FEE STATE	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			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" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER		CARTER
2 Name of Operator RAND PAULSON O	IL COMPANY INC		8. Well No.
3. Address of Operator 508 W. WALL, S	TE 100 MIDLAND, TX	79701	9. Pool name or Wildcat
4. Well Location	IE 100 MIDLAND, IN	11(0)	CARTER SAU ANDRES, SOUTH
Unit Letter 42: 990 Feet From The NORTH Line and 2310 Feet From The WEST Line			
Section 5	Township 18 - S Ran 10. Elevation (Show whether I	ige 39-E 1	NMPM LEA County
	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.) 36 GR	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTE	ENTION TO:	SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING		CASING TEST AND CEI	MENT 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.			
10-20-97 DUMP 35'OF CEMENT ON CIBPO 5581. SET CIBPO 4890,			
CUT 5/2" CASING @ 3176 AND POH. SET CEMENT PLUGS:			
1. SPOT 100 SX CEMENT ON TOP OF CIBP @ 3176'-TOC @ 4370'. CLASS C			
2. SPOT 25 SX CEMENT 2202-2102'. CLASS C.			
3. SPOT 25 SX CEMENT 485'-387, CLASS C.			
4, SPOT 10 SX 30'- SURF, CLASS C.			
			uarker. Cut off anchols
RELEASED ALL E			
ECCENSES ALL E	QUIPMEN, CLEA	10 2024 110	, •
I hereby certify that the information above is true ar	d complete to the best of my knowledge and t	elia.	
SIGNATURE OFFICE	тп.	AGEN.	T DATE 10-23-97
TYPE OR PRINT NAME	ROUTH		915 Telephone no.687- <i>0</i> 323
(This space for State Use)	2.0		2.00
Och and Ola	Slinson -	·	
CONDITIONS OF APPROVAL, IF ANY:	m	E	DATE
CONSTRUCTAL PARTY			

IC CW