iubmit 3 Copies

Nppropriate
District Office

INDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, M als and Natural Resources Department

Form C-103 Revised 1-1-89

| | DISTRICT 1 | SUPERIOR | | | | , m | |
|---|------------------------------|-------------------------------------|---------------------------------------|-----------------------------------|--|---------------------------------------|-----------------|
| his space for State Use) | ORIGINAL SIGNE | BY JERRY SEXTON | | | | NOV 1 | 6 ' 92 |
| PE OR PRINT NAME | Sherry Gallow | ay | | | | телетноне но. (505) | <u>746</u> -968 |
| DATURE ANTANC | ery Jelou | | тпи | • | · · · · · · · · · · · · · · · · · · · | DATE 11/11/92 | PARTIE A |
| ereby certify that the thi | ormation aboye is true and | complete to the best of my know | vledge and b | eliď. | *************************************** | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | | |
| | | | | | | | |
| | raid land Ow | ner for damages. | , | | | | · |
| | | 1 be ready to re | | hole 11/11/92. | | | |
| | 3000# flange | hole marker and d end well head; | ; moved | d in pulling ur | it, reverse ri | 3/8" x 13 5/8" g, and set | |
| 11/10/92 | Repaired roa | ds, location, ex | kcavate | ed cellar and pi | its. | | |
| . Describe Proposed o work) SEE RULE 1 | or Completed Operation 1103. | (Clearly state all pertinent | details, and | l give pertinent dates, inclu | ding estimated date of sta | rling any proposed | |
| | | | _ | OTHER: | | | |
| LL OR ALTER CASING LJ HER: Re-enter | | | | CASING TEST AND CE | EMENT JOB | | |
| LI OR ALTER CASING | | | | | | UG AND ABANDONME | :мт 📙 |
| REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK MPORARILY ABANDON CHANGE PLANS COMMENCE DRIVE | | | | | | TERING CASING | |
| | | | | | ISEQUENT REF | - | -1 |
| N∩⁻ | Check Ap TICE OF INTE | propriate Box to Inc | dicate N | | - | | |
| | | GR 3911 | · · · · · · · · · · · · · · · · · · · | | | | |
| Section 6 | | Township 19S | Ras v whether L | nge 35E DF, RKB, RT, GR, etc.) | NMPM Lea | i Tilitii | ounty |
| | | 100 | L11 | | rea rion in | | _ Line |
| Well Location Unit Letter | | Feet From The North | | | · · | | |
| P.O. Box 100, Artesia, New Mexico 88210 | | | | | 9. Pool name or Wildcat Scharb Bone Spring | | |
| JFG Enterp | | | | | 8. Well No. | | |
| WELL X WELL OTHER Name of Operator | | | | | Atlantic State | | |
| Type of Well: | OAS WELL | , | , | | A.1 | | |
| 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 Un | ult Agreement Name | |
| DOO Rio Brazos Rd., Aztec, NM 87410 | | | | | 6. State Oil & Gas Lease No. E-9982 | | |
| PISTRICT III | | | | | 5. Indicate Type of Lease STATE X FEE | | |
| P.O. Box 2088 ISTRICT II O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 | | | | | 30-025-23401 | | |
| ISTRICT II | | r.O. | DUX ZUO | 0 | 00 00= 001 | | |

- TITLE -

RECEIVED

MUV 1 8 1992

OCO HORSE OF