Submit 3 Copies

1. Type of Well:

WELL |

2. Name of Operator

3. Address of Operator

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

work) SEE RULE 1103.

11.

OTHER:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate District Office

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

GAS WELL

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

WELL API NO. P.O. Box 2088 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease FEE X 6. State Oil & Gas Lease No. 13857 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Mattie Price on Saltwater Disposal 8. Well No. Osborn Heirs Company 9. Pool name or Wildcat P. O. Box 17968, San Antonio, TX 78286 West Garrett (Devonian) G: 1820 Feet From The North Line and 2310 Feet From The East Line 17S hip 17S Range 38E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 38E Township **NMPM** County 3729 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHER:_ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed Plug and Abandon - Verbal approval. 12700' - 35 sxs on top of bridge plug 71501 - 25 sxs 5975' - 25 sxs

Perforated at base of surface pipe - 2 feet - 4 spf. Pumped out 50 sxs; wait 4 hrs and tagged cement at 3251. 20 sxs plug at surface. Gelled brine between plugs. Commission man on location while plugging. Plugging Completed 10-9-92

I hereby certify that the information above is true and complete to the best of my knowledge and be	liď.
SIGNATURE TITLE	Vice President-Production DATE 10-14-92
TYPEOR PRINT NAME Mike Stevenson	512-826-0700 TELEPHONE NO.
(This space for State Use)	

ck Gruffin CONDITIONS OF APPROVAL, IF ANY

APK 14 1993