

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1838-3	

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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
3. Address of Operator		9. Well No.
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER <u>G</u> , <u>2094</u> FEET FROM THE <u>East</u> LINE AND <u>2081</u> FEET FROM		<u>247</u>
THE <u>North</u> LINE, SECTION <u>24</u> TOWNSHIP <u>17S</u> RANGE <u>34E.</u> NMPM.		<u>Vacuum Abo, North</u>
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
<u>4017 GR</u>		<u>Lea</u>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUS AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

NEW WELL

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1108.

04/11/84 HOWCO cmt 8-5/8 csg on btm @ 5000 w/3000x Class C + 4% gel + 15# salt/x + 5# gilsonite/x + 1/4# FC/x + 300x Class C + 2% CaCl2 + 1/4# FC/x, PD @ 6:30 pm, cmt circ 285x, set 8-5/8 csg slips & cut off csg, WOC 12 hrs, & NU BOPs & test BOPs & 8-5/8 csg to 1000 psi/30 min/held ok, GIH w/ 7-7/8 bit & drlg new form @ 3:30 am 4/12/84.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paula A. Collins TITLE Authorized Agent DATE 04/13/84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE APR 13 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 16 1984

O.C.D.
HOBBS OFFICE