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CONDITIONS OF APPROVAL, IP AN

State of New Mexico

Form C-103

to Appropriate District Office Energy, Minerals and Natural Resources Department **Revised 1-1-89** DISTRICT OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. 310 Old Santa Fe Trail, Room 206 30-025-29841 DISTRICT II Santa Fe, New Mexico 87503 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE XXX FEE 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. V-1125 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.) Type of Well: WELL XX QAS WELL OTHER State "3" 2. Name of Operator 8. Well No. Amerind Oil Company Limited Partnership 3. Address of Operator 9. Pool name or Wildcat 415 W Wall Suite 500, Midland TX 79701 Shipp Strawn 4. Well Location 679 North 2130 Unit Letter Feet From The East Line and Feet From The Line **17S** Section 37E Township Range Lea **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3771' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT 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 CEMENT 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. 6/20/95 Set CIBP @ 11,150'. Displaced wellbore w/10 lb/gal brine gel. Spot 25 sx plug @ 11,150' 30 sx plug @ 8,133' 30 sx plug @ 6,346' Cut 5-1/2" csg @ 4110' & rec 97 jts. Displaced well bore w/brine mud. Spot 60 sx plug @ 4,250'. Tagged TOC @ 3,933'. Spot 45 sx plug @ 2,053' Set 10 sx surface plug @ 20'. Cut & remove wellhead Weld on dry hole marker. Well P & A 6/23/95 A SI I hereby cerufy that the information a implete to the best of my knowledge and belief. Agent 6/27/95 SIGNATURE James E. Yeley TYPE OR PRINT NAME TELEPHONE NO 915/682-8217 (This space for State Use)

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