

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Enr Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-30914
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name R.E. Graham 7
2. Name of Operator Helmerich & Payne, Inc.	8. Well No. 4
3. Address of Operator 1579 East 21st Street, Tulsa, OK 74114	9. Pool name or Wildcat Young (Bone Spring & Wolfcamp)
4. Well Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line Section 7 Township 18 South Range 32 East NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3760.5 GL	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Commingled Wolfcamp & Bone Spring <input checked="" type="checkbox"/>

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.

The Wolfcamp & Bone Spring formations were commingled by drilling out a CIBP as per Administrative order DHC-2453.

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

SIGNATURE Mark R. Thompson TITLE Production Superintendent DATE 10-26-99

TYPE OR PRINT NAME Mark R. Thompson

TELEPHONE NO. 918-742-5531

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 10 1999

