Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

Revised 1-1-

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			30-025-31171
DISTRICT III			5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. E-7259
SUNDRY NOT	ICES AND REPORTS ON WE	LLS	
(FORM (OPUSALS TO DRILL OR TO DEEPE RVOIR. USE "APPLICATION FOR P 1-101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A ERMIT	7. Lease Name or Unit Agreement Name Shell State
1. Type of Well: Oll. WELL X WELL	OTHER		Sherr State
2. Name of Operator			8. Well No.
Owens Petr 3. Address of Operator	oleum, Inc.		1
	911, Midland, Texas 79	9702	9. Pool name or Wildcat North Vacuum (Abo)
Unit Letter I : 1980	Feet From The South	Line and 60	60 Feet From The East Line
Section	17-8	35_E	
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	NMPM Lea County
11. Check	3986 GL, 4002 DF Appropriate Box to Indicate	Nature of Notice Po	Department of Other Day
NOTICE OF INT	ENTION TO:		SEQUENT REPORT OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON	1	
EMPORARILY ABANDON		REMEDIAL WORK	ALTERING CASING
ULL OR ALTER CASING	CHANGE PLANS	COMMENCE DRILLING	
<u> </u>		CASING TEST AND CEN	MENT JOB X
THER:		OTHER:	
 Describe Proposed or Completed Operat work) SEE RULE 1103. 	ions (Clearly state all pertinent details, as	nd give pertinent dates, includi	ng estimated date of starting any proposed
9/13/91 - Ran	413' of 13 3/8" new 48	# casing. Cemente	ed with 425 sacks
WOC for 18 hours. Pressure tested to 1000#. Held OK. 9/23/91 - Ran 4865' of new 8 5/8" casing. Cemented with 2400 sacks.			
9/23/91 - Ran WOC	for 18 hours. Pressure	sing. Cemented wi tested to 1000#.	th 2400 sacks. Held OK.
10/4/91 - Dril Ceme	led to T.D. of 8940'. Inted with 820 sacks.	Ran 8940' of new	5½" casing.
10/17/91 - Pres	ssure tested to 1000#. I	Held OK.	
hereby certify that the information above is intelligent	and complete to the best of my knowledge and I		
IIONATURE	TI CHUND III	President	DATE 11/25/91
YPEOR PRINT NAME Kenneth R	. Owens		TELEPHONE NO.915/683-4627
This space for State Use)	Signed by		
PPROVED BY C3	t Kautz Obsiata	P	DATE

ONDITIONS OF APPROVAL, IF ANY: