Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office		11.1002 2 2 3 3
EAU, DOE 1960, MODOS (SMLXX/4D)	VATION DIVISION	WELL API NO.
P.O. Box 2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30 025 31260
		5. Indicate Type of Lease STATEXXX FEE
1000 Rio Brazos Rd., Aztec, NM 87410		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.)		B 3009
		7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL XX WELL OTHER 2. Name of Operator		West Lovington Unit
GREENHILL PETROLEUM CORPORATION		8. Well No. 76
3. Address of Operator		9. Pool name or Wildcat
11490 Westheimer, Suite 200, Houston, 4. Well Location	Texas 77077	W. Lovington Upper San Andres
Section 5 Township 1	7S Range 36E ow whether DF, RKB, RT, GR, etc.)	South Line NMPM Lea County
Check Appropriate Box to I NOTICE OF INTENTION TO:		eport, or Other Data SSEQUENT REPORT OF:
		SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDO	N REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB KX		EMENT JOB KX
OTHER:	OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertines work) SEE RULE 1103.	ns details, and give persinens dates, inclu	ding estimated date of starting any proposed
Spud well 9-8-91. Ran 9 joints of 8 5/	8" 24# J-55 casing and	d set at 365' with 300 sacks of
Class "C" cement. Circulated cement to	surface. Test casing	g to 800#. WOC 10 3/4 hours.
Ran 122 joints of $5\frac{1}{2}$ " 15.5# J55 casing	and set at total deptI	n of 5230' with 1075 sacks of
Class "C" cement. Cement was circulate	d to surface. WOC gro	eater than 24 hours. Test casing
2000 psi.		
I hereby certify that the information above is true and complete to the best of my to	nowledge and belief.	
SIGNATURE Michael / housest	mu Land MgrPerr	nian Basin DATE 10-29-91
TYPEOR PRINT NAME Michael J. Newport		TELEPHONE NO.7]3 589-848
(This space for State Use) Paul Kauta		Many Le
APPROVED BY Geologist	тте	DATE

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