S [*] ruit 3 Copies to approprié District Office	State of New Mexico Energy, Minerals and Natural Resources Departme	nt Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION 2040 Pacheco St.	WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, NM 87505	30-025-32737 5. Indicate Type of Lesse
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		6. State Oil & Gas Lease No. NA
(DO NOT USE THIS FORM FOR PRO	ICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	
(FORM C 1. Type of Well:	RVOIR. USE "APPLICATION FOR PERMIT" -101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name LAWRENCE 19
OIL GAS WELL 2. Name of Operator	OTHER	8. Well No.
FAGADAU ENERGY CORPOR 3. Address of Operator 4849 GREENVILLE, # 10	COO, DALLAS, TEXAS 75206	9. Pool name or Wildcat
4. Well Location Unit Letter :	Feet From The NORTH Line and Township 17S Rance 39E	T E A
	Township Range 572 10. Elevation (Show whether DF, RKB, RT, GR, etc.,	NMPM Country
II. Check / NOTICE OF INT	Appropriate Box to Indicate Nature of Notice ENTION TO: S	Report, or Other Data
	PLUG AND ABANDON REMEDIAL WORK	
PULL OR ALTER CASING	CHANGE PLANS COMMENCE DRIL CASING TEST ANI	
OTHER:	OTHER:	CEMENT SQUEEZE
12. Describe Proposed or Completed Operative work) SEE RULE 1103.	ions (Clearly state all pertinent details, and give pertinent dates, i	ncluding estimated date of starting any proposed
SQUEEZED HOLE IN 5 ESTIMATED TOP OF C WELL TO PRODUCTION	1/2" CASING AT 5787-5819' WITH 100 EMENT @ + 4908'. RAN BACK IN HOLE	SX CLASS "C" CEMENT. WITH TUBING AND RETURNED

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I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SKONATURE	DATE
TYPE OR PRINT NAME CAROLYN L. MCKEE	TELEPHONE NO. 214369-5909
(This space for State Use)	
APPROVED BY TITLE	DATE

CONDITIONS OF	APPROVAL,	P	ANY:
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SOUEEZE					Construction of the second sec			
CEMENTING TO PLUG AND ABANDON	UG # 1	PLUG # 2	PLUG # 3	PLUG # 4	r'LUG # 5	PLUG # 6	PLUG # 7	+PCUG # 8
23. Cementing date	1-30-01							
24. Size of hole or pipe plugged (in.)	5 1/2							
25. Depth to bottom of tubing or drill pipe (ft.)	5690							
26. Sacks of cement used (each plug)	100							
27. Slurry volume pumped (cu. ft.)	132							
28. Calculated top of plug (ft.)	5690							
29. Measured top of plug, if tagged (ft.)								
30. Slurry wt. (lbs/gal)	14.8							
31. Type cement	с							

CEMENTER'S CERTIFICATE: I declare under penalties prescribed in Sec. 91.143. Texas Natural Resources Code, that I am authorized to make this certification, that the cementing of casing and/or the placing of cement plugs in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct, and complete, to the best of my knowledge. This certification covers cementing data only.

DAVID W. BOGGS	FLEET CEMENTERS, INC.		Byza	
Name and title of cementer's representative	Cementing Company	Signature	<i>ν</i>	
P.O. DRAWER 61327	MIDLAND, TX 79711	<u>915 563-8025</u>	<u>1-30-01</u>	
Address	City, State, Zip Code	Cel.: Area Code Number	Date: mo. day	ут.

OPERATOR'S CERTIFICATE: 1 declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct, and complete, to the best of my knowledge. This certification covers all well data.

Typed or printed name of operator's representative	Title		Signature				
Address	City.	State. Zip Code	Tel: Area Code Number	Date:	mo.	day	yr.

Instructions to Form W-15, Cementing Report

IMPORTANT: Operators and cementing companies must comply with the requirements of the Commission's Statewide Rules 8 (Water Protection), 13 (Casing, Cementing, Drilling, and Completion), and 14 (Well Plugging). For offshore operations, see the requirements of Rule 13 (c).

A. What to file. An operator should file an original and one copy of the completed Form W-15 for each cementing company used on a well. The cementing of different casing strings on a well by one cementing company may be reported on one form. Form W-15 should be filed with the following:

 An initial oil or gas completion report, Form W-2 or G-1, as required by Statewide or special field rules;

- Form W-4. Application for Multiple Completion, if the well is a multiple parallel casing completion and
- Form W-3, Plugging Record, unless the W-3 is signed by the cementing company representative. When reporting dry holes, operators must complete Form W-15, in addition to Form W-3, to show any casing cemented in the hole.

B. Where to file. The appropriate Commission District Office for the county in which the well is located.

C. Surface casing. An operator must set and cement sufficient surface casing to protect all usable-quality water strata, as defined by the Texas Department of Water Resources, Austin. Before drilling a well in any field or area in which no field rules are in effect or in which surface casing requirements are not specified in the applicable rules, an operator must obtain a letter from the Department of Water Resources stating the protection depth. Surface casing should not be set deeper than 200 feet below the specified depth without prior approval from the Commission.

D. Centralizers. Surface casing must be centralized at the shoe, above and below a stage collar or diverting tool, if run, and through usable-quality water zones. In nondeviated holes, a centralizer must be placed every fourth joint from the cement shoe to the ground surface or to the bottom of the cellar. All centralizers must meet API specifications.

E. Exceptions and alternative casing programs. The District Director may grant an exception to the requirements of Statewide Rule 13. In a written application, an operator must state the reason for the requested exception and outline an alternate program for casing and cementing through the protection depth for strata containing usable-quality water. The District Director may approve, modify, or reject a proposed program. An operator must obtain approval of any exception before beginning casing and cementing operations.

F. Intermediate and production casing. For specific technical requirements, operators should consult Statewide Rule 13 (b) (3) and (4).

G. Plugging and abandoning. Cement plugs must be placed in the wellbore as required by Statewi de Rule 14. The District Director may require additional cement plugs. For onshore or inland wells, a 10-foot cement plug must be placed in the top of the well, and the casing must be cut off three feet below the ground surface. All cement plugs, except the top plug, must have sufficient slurry volume to fill 100 feet of hole, plus ten percent for each 1.000 feet of depth from the ground surface to the bottom of the plug.

To plug and abandon a well, operators must use only cementers approved by the Director of Field Operations. Cementing companies, service companies, or operators can qualify as approved cementers by demonstrating that they are able to mix and pump cement in compliance with Commission rules and regulations.

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Suburit 3 Copies to Appropriate District Office	State of New Me Ener, Minerals and Natural Re			Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO 2040 Pacheco S		WELL API NO. 30-02	5-32737
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type	of Lesse STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Ga	
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESEF (FORM C	CES AND REPORTS ON WEL PPOSALS TO DRILL OR TO DEEPEN AVOIR. USE "APPLICATION FOR PER- 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name o	r Unit Agreement Name
1. Type of Well: OIL GAS WELL	OTHER		LAWR	ENCE 19
2. Name of Operator FAGADAU ENERGY CORP	ORATION		8. Well No.	1
3. Address of Operator 4849 GREENVILLE # 1	600, DALLAS, TEXAS 7520	6	9. Pool name or	Wildcat
4. Well Location Unit Letter <u>C</u> : 66 Section ¹⁹	Ú Feet From The NORTH Township 17S Ra	Line and age) Feet From LEA	
	10. Elevation (Show whether			County
	Appropriate Box to Indicate 1			
	'ENTION TO:	SUE	BSEQUENT F	
		REMEDIAL WORK		
		COMMENCE DRILLIN	G OPNS.	
PULL OR ALTER CASING		CASING TEST AND C		
OTHER Cement Squeeze	X	OTHER:		
12. Describe Proposed or Completed Opera work) SEE RULE 1103. PROPOSE TO CEMENT 100 SX CLASS "C"	SQUEEZE HOLE IN 5 1/2'			

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I hereby certify that the information above is true and complete to the best of phy knowle SKONATURE	mage and bases. mmaProduction_Analyst	DATE
TYPE OR PRINT NAME Carolyn L. McKee	(214)369-5909	TELEPHONE NO.
(Thus space for State Use)		
(Ima space for State Cae)		



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