

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 34111
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VA-814
7. Lease Name or Unit Agreement Name M. J. Harvey "16" #1
8. Well No. 1
9. Pool name or Wildcat North Vacuum ABO

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	
2. Name of Operator Morexco, Inc.	
3. Address of Operator P.O. Box 481 Artesia, NM 88211	
4. Well Location Unit Letter H : 519 Feet From The EAST Line and 2121 Feet From The North Line Section 16 Township 17 S. Range 34 E. NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 checked="" type="checkbox"/>
	OTHER: <input 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.

9/29/97 TD 9050'

9/30/97 Ran 205 jt. of 5½ 17# casing. Set @ 9050' cmt'd w/ 1000 sxs 35% poz: 65% class H w/ 6% GEL, 5% salt, .25# cello flake followed by 100 sxs class H w/ .8% Fl-62, .3% CD-32 & .2% SM. Plug down @ 8:15 AM. Est. top of cement 3000 ft. Set slips & released rig.

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

SIGNATURE Donald G. Becker, Jr. TITLE President DATE 10-6-97

TYPE OR PRINT NAME Donald G. Becker, Jr. TELEPHONE NO.

(This space for State Use)

DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

757 08 1997