Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, 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.

30-025-34638

5. Indicate Type of Lease
STATE X FEE

6. State Oil & Gas Lease No. E-5838

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.)	7. Lease Name or Unit Agreement Name Toro "27" State Com.	
1. Type of Well: OUL GAS WELL OTHER Drilling		
2. Name of Operator	8. Well No.	
LOUIS DREYFUS NATURAL GAS CORP.	1	
3. Address of Operator 14000 Quail Springs Parkway, Suite 600	9. Pool name or Wildcat	
Oklahoma City, OK 73134	Wildcat Morrow (96886)	
Unit Letter K : 1650 Feet From The South Line and 1650 Section 27 Township 19S Range 35E 1 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3720 GR		
11. Check Appropriate Box to Indicate Nature of Notice, Re	eport, or Other Data	
	SUBSEQUENT REPORT OF	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CE	MENT JOB X	
OTHER: OTHER:		

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.

Drilled 12 1/4" to 5300'. Ran 9 5/8" 40# casing, set at 5275' (5298' KB). Cemented w/2105 sx. 35:65 POZ + 6% D20 + 5% D44 + 0.25 pps D29; 12.8 density, 1.94 yield. Tailed w/215 sx. C1. C + 1% S1; 14.8 density, 1.32 yield. Circulated 280 sx. to pit. Bumped plug, float held. Tested @ 2000 psi. Tested manifold & BOPs @ 5000 psi; hydrill @ 2000 psi, low pressure @ 250 psi.

Commenced drilling 7 7/8" hole on 7/22/99.

I hereby certify that the mornation aboversative and complete to the best of my	knowledge and belief.	
I hereby certify that the information above userse and complete to the best of my SKINATURE WHAT SHOWN THE SKINATURE	mæ Regulatory Technician	
TYPEORPRINTNAME Terrye D. Bryant		(405) TELEPHONE NO. 749=5287
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Thus space for CARIGINAL SIGNED BY

CONTRACTOR ADDROVAL BEANY

APPROVED BY -

FIELD REP. II

TILE -

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