Submit 3 Copies To Appropriate District	State of New	w Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II			30-025-34981	
011 50441 1101, 14 60510		5. Indicate Type	of Lease	
1000 Rio Brazos Rd. Aztec, NM 87410		STATE		
District IV	Santa Fe, N	M 87505	6. State Oil & C	Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505			B1606-0	
(DO NOT USE THIS FORM FOR PROPORTION OF THE PROPOSALS.)  1. Type of Well:	CATION FOR PERMIT" (FORM C-	OR PLUG BACK TO A	7. Lease Name Name:  Bimini State 13	or Unit Agreement
Oil Well X Gas Well	Other			
2. Name of Operator			8. Well No. 1	
Southwestern Energy Production Company			ļ	*****
3. Address of Operator 2350 N. Sam Houston Parkway East, Suite 300 – Houston, TX 77032			8. Pool name or	Wildcat
4. Well Location			Vacuum Abo NE	
4. Well Education				
Unit Letter E:	2310 feet from the N	line and990	feet from the W	line
Section 13	Township 17S	Range 35E	NMPM Lea	County
	10. Elevation (Show wheth			County
	3921 GR	,,,,	,	
11. Check A	ppropriate Box to Indica	te Nature of Notice,	Report or Other	Data
NOTICE OF IN			SÉQUENT REI	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	к 🗆	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN	ın M	ABANDONMENT
FOLL OR ALTER CASING	COMPLETION	CASING TEST AN	ND 🔀	
	33/11/21/31/	CLIVICIN I JOB		
OTHER:		OTHER:		
12. Describe proposed or complete of starting any proposed work). or recompilation.	d operations. (Clearly state a SEE RULE 1103. For Multi	Il pertinent details, and giple Completions: Attacl	ive pertinent dates, in wellbore diagram of	including estimated date of proposed completion
3/29/00 thru 4/1/00 Drill to 3,320'. gel + 0.25 pps celloflake. Tail w/15 psi. OK.	Run 74 jts 9 5/8" 40#, K-55 5 sx "c" + 2% CACL + 0.259	csg to 3,320'. Cement le % celloflake. Circ 177 sx	ead w/855 sx 35:65 l to reserve pit. WO	POZ C + 5% salt, +6% C. Test casing to 1500
/				
I hereby certify that the information	bove is true and complete to	the best of my knowledg	ge and belief.	
SIGNATURE AND LE		LE Drilling Technician	DATE	4/3/00
Type or print name Cathy Rowan	1111	Diming Technician	Telephone No. 2	
(This space for State use)	<del></del>			
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APPPROVED BY	TŢŢŢĹ	E		DATE 25
Conditions of approval, if any:	10° 10°			

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