

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.

5. Indicate Type of Lease  
STATE ☐ FEE ☒

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.)

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator  
JFG Enterprise

3. Address of Operator  
P.O. Box 100, Artesia, New Mexico 88211-0100

4. Well Location  
Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line  
Section 24 Township 20S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3656' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

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.

January 11, 1989:

Plugged and abandoned:

Set CIBP with 35' of cement on top.

Load hole with 10# Salt Gel.

Set cement plug 50' in and out. Cut off at 5½" casing.

Set cement plug 50' in and out. 8 5/8" shoe.

Set 10 sack surface plug at top hole and installed dry hole marker.

Restored surface as set out in regulations.

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

SIGNATURE J. T. Jackson TITLE Partner DATE 9/20/89

TYPE OR PRINT NAME J.T. Jackson TELEPHONE NO. (505) 746-9680

(This space for State Use)

APPROVED BY [Signature] TITLE OIL & GAS INSPECTOR DATE MAY 29 1990

CONDITIONS OF APPROVAL, IF ANY: