Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

OH CONSEDUATION DIVISION

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240	1980, Hobbs, NM 88240 310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503 Santa Fe, New Mexico 87503		WELL API NO. 30-025-2	 21258
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of I	· · · · · · · · · · · · · · · · · · ·
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas L E-8913	
SUNDRY NOTICES AND REPORTS ON WELLS				
	OPOSALS TO DRILL OR TO DEEF RVOIR. USE "APPLICATION FOR 101) FOR SUCH PROPOSALS.)		7. Lease Name or Un	ait Agreement Name
1. Type of Well: OIL OAS WELL X WELL	OTHER		State E	
2. Name of Operator Stevens & Tull	Tno		8. Well No.	
3. Address of Operator	, IIIC.		9. Pool name or Wild	icat o /
	, Midland, TX 79702		Wildcat	
4. Well Location Unit Letter D : 660	Feet From The North	Line and	560 Feet From Th	ne <u>West</u> Line
Section 20		Range 36E ther DF, RKB, RT, GR, etc.)	NMPM	Lea County
11. Check A	Appropriate Box to Indica	te Nature of Notice, R	eport, or Other D	<u>'////////////////////////////////////</u>
NOTICE OF INT			SEQUENT REF	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	AL:	TERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PL	UG AND ABANDONMENT
ULL OR ALTER CASING CASING TEST AND CEMENT JOB				
OTHER:	C	OTHER:	Reentry	&
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	tions (Clearly state all pertinent detail	ils, and give pertinent dates, incl	uding estimated date of s	tarting any proposed
7/31/96 - MIRU	Drilling Rig - Capst	tar Rig #5		
8/7/96 - Fish I	Drill Collars (6) + 8	3 5/8" bit out of	hole	
8/16/96 - RIH v 5 1/2	with 125 joints 5 1/2 2" casing stub at 536	2" - 17# - J55 cas 50' using lead sea	sing and tie b il casing patc	ack h
	t 11,123' with 4 5/8' led out - prepare to 35'.			
I hereby certify that the information above is true as	nd complete to the best of my knowledge and			
SIGNATURE SALVEN	young	TIME Consulting E	Ingineer	DATE 8/28/96
TYPE OR PRINT NAME	,		TELEPHONE NO.	
(This space for State Use)				CCT 15 1995
APPROVED BY		TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY:				/