Submit 3 Copies To Appropriate District Office State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240	Revised March 25, 1999 WELL API NO.
District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-27220
District III 1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pacheco	5. Indicate Type of Lease STATE FEE
District IV Santa Fe, NM 87505 2040 South Pacheco, Santa Fe, NM 87505	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	7. Lease Name or Unit Agreement Name:
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	L. w- white
2. Name of Operator DENROC Oil GRP	8. Well No. 34. 2Y
3. Address of Operator P.O. Box 5970, Hobbs, NM 88241	9. Pool name or Wildcat Eumont Yates 7 Riven Queen
- 1960 South	
Unit Letter : 660 feet from the East line and 1986 feet from the North line	
Section 34 Township 20 S Range 34 C NMPM County 40	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE CASING TEST AN COMPLETION CEMENT JOB	ABANDONMENT D
OTHER: add perfi & return to prod. \(\omega \) 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	
In late July/august 2001, plan to rig up. add	
additional perfs as recommended by our geologist.	
If after swab test, well tests commercial will	
install purping equipment a produce. New perfo to	
be added: 3700-10, 3740'-43, 3750-64.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE LOS OF A PLANT PARTIE PARTIE	DATE 4/6/
Type or print name M. Y. Merchaul (This space for State use)	Telephone No. (505) 39 7- 3 59
(This space for State use)	
APPPROVED BYTITLE Conditions of approval, if any:	DATE

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