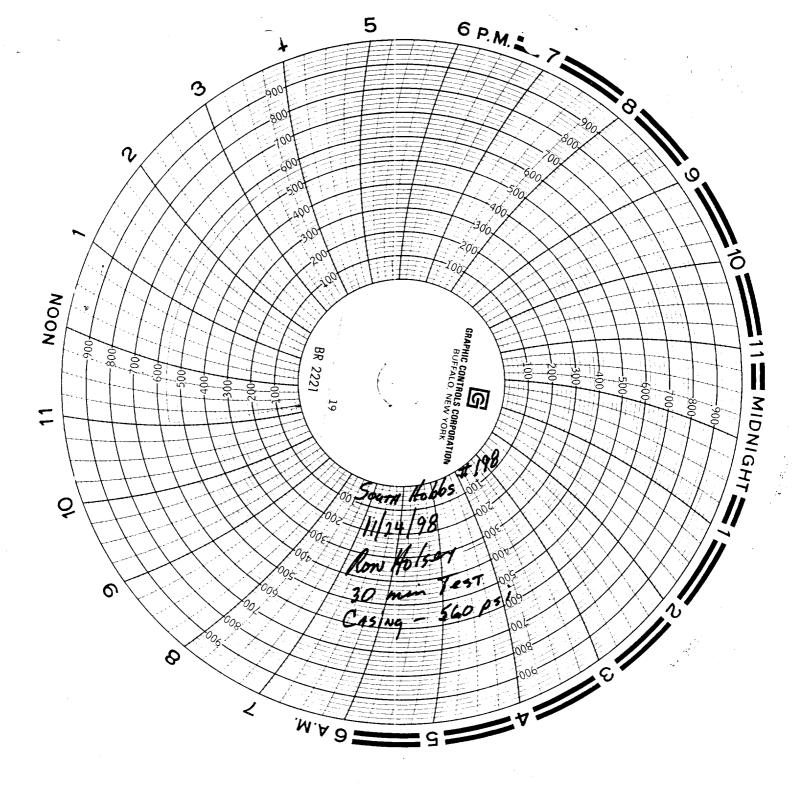
State of New Mexico Energy, Mir—als and Natural Resources Department

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OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 8824		e Trail, Room 206 v Mexico 87503	WELL API NO. 30-025-29442
			5. Indicate Type of Lease FED STATE X FEE
			6. State Oil & Gas Lease No.
SUND	RY NOTICES AND REPORTS ON W	ELLS	
	FOR PROPOSALS TO DRILL OR TO DEEPE IT RESERVOIR. USE "APPLICATION FOR P (FORM C-101 FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name Hobs GRAYBURG/SAN ANDRES
Type of Well: Oil Well	X Gas Well Other	Ut	
2. Name of Operator ALTURA ENERGY L	TD.		8. Well No. 198
3. Address of Operator 1710 WEST STANOLIND R	D, HOBBS, NM 88240	505/397-8200	9. Pool name or Wildcat HOBBS 68/5A
4. Well Location	The Date of Manager		. D. Till Marcon 11
Unit Letter	749 Feet From The NORTH		t From The WEST Line
Section 6	Township 19-S 10. Elevation (Show whether DF,	Range 38-E	NMPM LEA County
11.	3648' DF Check Appropriate Box to Indicate	Nature of Notice, Report of	or Other Data
	OF INTENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PLUG & ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEMEN OTHER: TEMPORARY	
OTHER: 12. Describe Proposed or Complete	eted Operations (Clearly state all pertinent detail	i	
work) SEE RULE 1103.			
Test Date: 11/24/98	(IBP@	4105 per	K6
Pressure reading: Initial 560	psi: 15 min 560 psi; 30 min 560 ps	Si.	
Length of time pressure held:	30 min.		
Test Witnessed: No			
	76a	is Approval of Tec	anumany / O /
	A Company of the Comp	endonment Expires	12/31/2003
I hereby certify that the informat	ion above is true and complete to the best of my l	knowledge and belief.	*
SIGNATURE Notice	t N. Filbut	TITLE LIFT SPECIAI	LIST DATE 11/24/98
	N. GILBERT		TELEPHONE 505/397-8206 NO.
(This space for State Use)	ORIGINAL SIGNED BY		man a last a
APPROVED BY	CARRYMONEX TITLE		DATE LICE

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State of New Mexico Energy, Mine als and Natural Resources Department

OIL CONSERVATION DIVISION

DISTRICT I	OIL CONSERVA	TION DIVISION	WEY LADING
P.O. Box 1980, Hobbs, NM 8824	o 310 Old Santa Fe	Trail, Room 206	WELL APINO. 38.025-29442
	Santa Fe, New	Mexico 87503	5. Indicate Type of Lease
			FED STATE X FEE
			6. State Oil & Gas Lease No.
			0, 544.5
ar DIDI	RY NOTICES AND REPORTS ON WE	LLS	
SUNDE	FOR PROPOSALS TO DRILL OR TO DEEPEN	7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM DIFFEREN	TO RESERVOIR. USE "APPLICATION FOR PE	RMIT"	1 5 HOBBS
	(FORM C-101 FOR SUCH PROPOSALS.)		GRAYBURG/SANANDRES
1. Type of Well:	Gas Well Other		lle
	X Gas Well Other		8. Well No. 198
2. Name of Operator ALTURA ENERGY L	TD.		William
3 Address of Operator		505/397-8200	9. Pool name of Wildeat HOBBS GB SA
1710 WEST STANOLIND R	D, HOBBS, NM 88240	303/397-8200	HOBBS OF ST
4. Well Location			et From The WEST Line
Unit Letter & C	749 Feet From The NORTH	Line and 1981 Fee	et From The WEST Eme
Section 6	Township 19-S	Range 38-I	E NMPM LEA County
Section ()	10. Elevation (Show whether DF,	RKB RT GR, etc.)	
	3648' DF		
11.	Check Appropriate Box to Indicate 1	Nature of Notice, Report,	or Other Data SSEQUENT REPORT OF:
NOTICE	OF INTENTION TO:	1	·
PERFORM REMEDIAL	PLUG AND	REMEDIAL WORK	ALTERING CASING
WORK	ABANDON	COMMENCE DRILLING O	PNS. PLUG & ABANDONMENT
TEMPORARILY ABANDON	X CHANGE PLANS		
PULL OR ALTER CASING		CASING TEST AND CEME	.N1 JOB
OTHER:		OTHER:	
12 Describe Proposed or Comp	oleted Operations (Clearly state all pertinent detail	s, and give pertinent dates, incl.	uding estimated date of starting any proposed
work) SEE RULE 1103.	·		
NAME OF THE STREET OF THE STRE	FORE RIG UP. (393-6161)		
- DULL OUT OF HOLE WIT	TEPRODUCTION EQUIPMENT.		
RIH W/5.5" CSG SCRAPE	R TO 4125°. TOP PERF (#4155°	CHART FOT THE NMOC!	D. * NOTIFY THE NMOCD 24HR BEFORE
SET 5.5" CIBP @ 4100".	TEST CSG TO 500 PSI FOR 30 MIN AND	CHART OF THE MADE	•••
CSG TEST. CIRC CSG WITH INHIBIT	TED FLUID.		
POH W/TBG, RDPU. CLE	EAN LOCATION.		
• · · · ·			
Thereby certify that the inform	nation above is true and complete to the best of my	knowledge and belief.	
\mathcal{A}'	TN Lillat	TITLE LIFT SPECL	ALIST DATE 10/22/98
SIGNATURE	The state of the s		TELEPHONE 505/397-8206
TYPE OR PRINT NAME	R.N. GILBERT		NO.
(This space for State Use)	Ya CENTO BY		
(This space for state (50)	TITLE	,	DATE
APPROVED BY	THE		