Submit 3 Copies to Appropriate District Office

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

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION (WELL ARENO)				
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088			WELL API NO. 30 025 32012	
DISTRICT II P.O. Drawer DD, Arlesis, NM 88210 Santa Fe, New Mexico 87504-2088			5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE	FEE X
			O. State Off & 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.)			7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL X WELL OTHER			Scharbauer "4"	
2. Name of Operator			8. Weli No.	
Mitchell Energy Corporation 3. Address of Operator			9. Pool name or Wildcat	
P.O. Box 4000, The Woodlands, Texas 77387-4000			Teas West (Yates/Seven Rivers)	
4. Well Location	Journal Texas 17307	4000	reas west (races/seven r	Trens,
Unit Letter P: 660	Feet From The South	Line and66	60 Feet From The Bast	Line
Section 4	Township 205 Rs		NMPM Lea V//////////	County
	3551	D. ,		
11. Check A	Appropriate Box to Indicate	Nature of Notice, Re	eport, or Other Data	<i></i>
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	<u></u>
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDON	MENT
PULL OR ALTER CASING CASING TEST AND CE		MENT JOB		
OTHER: Permit to Drill Extension X 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.				
Mitchell requests that the Permit to Drill for this well be extended for six (6) months.				
		Expires	June 24 199	5
I hereby certify that the information above is true	and complete to the best of my knowledge and			_
SIONATURE SION	c'I Millen	Reg. Affairs	Specialist DATE 11-18-9) 4
,			(713)377-585	
TYPEOR PRINT NAME George Mu	ıllen		TELEPHONE NO.	
(This space for State Use) ORIGI	nal stoned by Jeary Sextoi Destrict I Cupervisor	N	11011 2 2 1994	

. TITLE -

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY