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State of New Mexico Form C-103 Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 DISTRICT OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-06203 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE X STATE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: Eunice Monument Unit OIL WELL OTHER X Shut IT? WELL 2. Name of Operator 8. Well No. Burgundy Oil & Gas of New Mexico, Inc. 9 3. Address of Operator 9. Pool name or Wildcat 401 W. Texas, Suite 1003, Midland, TX 79701-4413 Eunice Monument (GB-SA) Well Location Unit Letter D: 330 Feet From The North 330 West __ Line and ___ _ Feet From The _ 21 Township 20S Range 37E **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB Temporary abandon OTHER: 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. Pull and lay down 120 jts 2 3/8" tbg - 5/6/97 RUWL and make JB run to 3240' Set 7" CIBP @ 3200' - cap w/ 40' cmt - 5/7/97 3. Load csg w/ pkr fluid - 5/8/97 Run OCD MIT to 520# for 30" - witnessed by Buddy Hill - 6/19/97 This Approval of Temporary Mandonment Expires

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I hereby certify that the information above is true and complete to the best of	my knowledge and belief.	
SIGNATURE Den Paylor	mmæ Production Manager	DATE 7/3/97
TYPE OR PRINT NAME Ben D. Taylor		(915) 684–4033 TELEPHONE NO.
(This space for State Use) PROMAL STORICO BY GARY WARE FIELD REP. II		
APTROVED BY	TITLE	DATE