Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-100

70,		<u>.</u> — — — — — — — — — — — — — — — — — — —	Revio	ઓ 1-1-89
DISTRICTI P.O. Box 1980, Hobbs, NM 88240	OIL CONSER	VATION DIVISION		
District II P.O. Box 2088			WELL API NO.	
P.O. Drawer DD, Artesia, NM 882	10 Santa Fe, New	Mexico 87504-2088	30-025-06930 5. Indicate Type of Lease	
DISTRICT III 1000 Rio Bizzos Rd., Azzec, NM 8	7410		STATE	FEE G
			6. State Oil & Gas Lease No.	
SUNDRY	NOTICES AND REPORTS	ON WELLS	1//////////////////////////////////////	777777 77 7
DIFFERENT	RESERVOIR. USE "APPLICATION	O DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Na	
L. Type of Well:	PRM C-101) FOR SUCH PROPOS	SALS.)	The Gouth Agreement Na	me
OIL X GAS WELL	, 1 1		W. T. McComack	
2. Name of Operator	- CLI OTHER		W. I. McComack	
Chevron U.S.A. In	c.	•	8. Well No.	
3. Address of Operator	1 - 174 00040		9. Pool name or Wildon	
P.O. Box 670, Hob	bs, NM 88240		Penrose Skelly GR	•
Unit LenerA :_	660 Feet From The No	rth Line and		
Section 32		Line and	660 Feet From The East	Lin
	Township 21S	Range 37E	NMPM Lea	· ·
	<i>///////</i> /////////////////////////////	w whether DF, RKB, RT, GR, etc.)	\////////	County
11. Che	ck Appropriate Box to In	idicate Nature of Notice, R		
NOTICE OF	INTENTION TO:	Si in	SECULENT DEDOCT	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	1 1	SEQUENT REPORT OF:	
TEMPCRARILY ABANDON		REMEDIAL WORK	ALTERING CASING	3 [
PULL OR ALTER CASING	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABAND	ONMENT [
	J	CASING TEST AND CE		
OTHER: Cleanout, acidi	ize, frac	_ X OTHER:		_
12. Describe Proposed or Completed O	perations (Clearly state all pertinent	details and give and	ing estimated date of starting any proposed	
WORK SEE RULE 1103.	, , ===	give periotent dates, includ	ing estimated date of starting any proposed	!
gelled BW, 35,500#	5 13% NEFE HCL. Swab F 20/40 ottawa sand, Leans up. Clean out	3802', acidize open back, Frac open hole leave closed in overn sand to 3802'. RIH w	w/20,000 gallons	
•				
I hereby certify that the information above is	The and complete to the him is			
SIGNATURE M. E.	ab .			
- Z.	over	mme _ Staff Drillin	g Engineer DATE 5-4-8	9
TYPE OR PRINT NAME				
(This space for State Use ORIGINAL SIG	NED BY JERRY SEXTON		ТЕГЕРНОМЕ НО.	
DISTRIC	CT I SUPERVISOR		11 AL 201 A	40.5
APPROVED BY			MAY 78	1989
CONDITIONS OF APPROVAL IF ANY:			DATE	