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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103

District Office		VATION DIVISION	nt	Revisied 1-1-89
District Office		Box 2088		
DISTRICT I		lew Mexico 87504-2088		
P.O. Box 1980, Hobbs, NM 8		10W WEXICO 07304-2008		
DISTRICT II			API NO. (assigned by OCD on New Wells)	
P.O. Drawer Dd, Artesia, NM 88210			30-025-	
DISTRICT III			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, N	m 87410		STATE	FEEX
			6. State Oil & Gas Lease No.	
			N/A	
SUNDRY NOTICES AND REPORTS ON WELLS				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK			7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			CENTRAL DRINKARD UNIT	
1. Type of Well:			CENTRAL DRINKARI	DOMI
OIL	GAS			
WELL X	WELL OTHER			
2. Name of Operator			8. Well No.	
3. Address of Operator	U.S.A. INC.			48
	I AND TX 79702 ATTN: NITA	RICE	9. Pool name or Wildcat DRINKARD	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE DRINKARD 4. Well Location DRINKARD				
Unit Letter	L : 1980 Feet From T		660 Feet From Th	e WEST Line
Section 3.		21S Range	37E NMIPM	LEA County
	TO. Elevation	on(Show whether DF, RKB, RT, GR, etc.		
11	Check Appropriate Box to Indecate	3457' GR		
	F INTENTION TO:	SUBSEQUENT I		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER CASIN	ıs \square
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND A	
PULL OR ALTER CASING		CASING TEST AND CMT JOB		
OTHER:		OTHER:	j	
	npleted Operations(Clearly state all pertinent de	tails, and give pertinent dates, including		
esticated date of starting a	ny proposed work) SEE RULE 1103.			
WORK DEE	PEOPMED 1 2 TUBLE 1 04			
WORK PERFORMED 1-2 THRU 194				
PLUG #1, SET CIBP @ 6440', W/25 SX CMT ON TOP. (COVERS 5" SHOE)				
	35 SX CMT F/5000-5200' (CO	•		
PLUG #3, PERF 5" CSG @ 3600,PRES UP TO 400# W/NO BLEED OFF. SPOT 25 SX CMT PLUG				
(OK'D BY JERRY SEXTON W/OCD) PLUG #4, PERF @ 1250', SQZ W/65 SX PLUG				
ESTAB CIRC DN 5" & UP 7" CSG, CIRC DN 5" & UP 7" SURFACE TO 1250'.				
SET 10 SX SURFACE PLUG				
PLACE 9.5 PPG MUD BETWEEN ALL PLUGS.				
PULL DEAD MAN ANCHORS, FILL PITS, LEVEL LOCATION, PLACE P&A MARKER				
CHANGE S	STATUS OF WELL TO PLUGGED	AND ABANDONED.		
I hereby certify that the information	ation above is trice and complete to the best of n	ny knowledge and belief.		
SIGNITURE	ta tica TITLE	TECHNICAL ASSISTANT	DATE: 1/12/9	4
				<u> </u>
TYPE OR PRINT NAME	NITA RICE		TELEPHONE NO. (915)687	-7436
	1 1)			
APPROVED BY	V. H. S. S. T.	* * · · · · · · · · · · · · · · · · · ·	ner teo 4	5 1994
CONDITIONS OF APPROVAL, I	FANY:		DATE	U 1001

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