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State of New Mexico Ainerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Bex 1980, Hobbs, NM 88240

## OIL CONSERVATION DIVISION P.O. Box 2088

30-025-07839	1	
5. Indicate Type of Lease STA	ATE [	FEE X
6. State Oil & Gas Lease No	D.	

Santa Fe, New Mexico 87504-2088		V			
	Artesia, NM 88210	88210		5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos	Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
( DO NOT USE	THIS FORM FOR PROPO DIFFERENT RESERVO	ES AND REPORTS ON W DSALS TO DRILL OR TO DEEPI DR. USE "APPLICATION FOR F 1) FOR SUCH PROPOSALS.)	EN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
1. Type of Well		OTHER		- Kyte	
2 Name of Ope Stevens				8. Well No.	
3. Address of O	perator × 11005, Midland	, Texas 79702		9. Pool name or Wildcat Wildcat	
Well Location     Unit Let	n A : 660	Feet From The North	Line and660	Feet From The East Line	
Section	23 ////////////////////////////////////	207		NMPM Lea County	
11.	Check Ap NOTICE OF INTE	propriate Box to Indicate NTION TO:		eport, or Other Data SEQUENT REPORT OF:	
PERFORM REME	EDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY A	ABANDON [	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER	CASING		CASING TEST AND CE		
OTHER:			OTHER: Commence Reentry		
12. Describe Propietors) SEE R	osed or Completed Operation ULE 1103.	s (Clearly state all persinent details,	and give pertinent dates, inclu-	ding estimated date of starting any proposed	
4/30/93	Drill out 8' su junk in hole	urface plug with ra	thole machine - R	un 2 3/8" tubing to 2200'	
5/3/93	Fish out 600' of 2 7/8" tubing left in hole - new TD @ 2800', ran into junk continue fishing				
5/10/93	Temporarily abandon hole to reevaluate (junk in hole appears to be 5 $1/2^{\prime\prime}$ casing lining) get with Paul at Hobbs NMOCD about P&A procedures.				
I hereby certify that	the information above is true and	complete to the best of my knowledge a	nd belief. True Engineer	E /11 /00	
SIONATURE - 22	- Michael C M-	1	ma <u>Luginger</u>	DATE _5/11/93	
TYPE OR PRENT NAM		oney		TELEPHONE NO315-699-141	
(This space for State	•	a Kaphi a , Tiv		MAY 13 1993	
AJTROVED BY			TILE	DATE TO THE TOTAL TO THE TOTAL	

CONDITIONS OF AHPROVAL, IF ANY: