

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-08823

5. Indicate Type of Lease
STATE FEE

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
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

State A AC 2

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
11

2. Name of Operator
Clayton Williams Energy, Inc.

9. Pool name or Wildcat
Eunice 7 Rvrs Queen, South

3. Address of Operator
Six Desta Drive, Suite 3000 Midland, Texas 79705

4. Well Location
Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line
Section 7 Township 22S Range 36E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3617' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING
OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
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.

Est. Start Date: 04/14/94

- 1) Set CIBP at ± 3080'.
- 2) Load and test casing to 500 psi for 30 minutes.
- 3) Properly TA well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Greg Benton TITLE Petroleum Engineer DATE 04/12/94
TYPE OR PRINT NAME Greg Benton TELEPHONE NO. 682-6324

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE APR 14 1994

CONDITIONS OF APPROVAL, IF ANY: