

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Geology, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

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

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

**OIL CONSERVATION DIVISION**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO. 30-025-27589
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Filbert
8. Well No. 1
9. Pool name or Wildcat Nadine Paddock-Blaineby, West

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
2. Name of Operator CROSS TIMBERS OPERATING COMPANY	
3. Address of Operator 3000 N. Garfield, Suite 175 Midland, Texas 79705	
4. Well Location Unit Letter <u>J</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>8</u> Township <u>20S</u> Range <u>38E</u> NMPM <u>Lea</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3,562'</u> GR <u>3,577'</u> RKB	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Acidize</u> <input checked="" type="checkbox"/>

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.

11/26/96 - 11/28/96 Pulled pump & tbq. Ran tbq. Acidized Blaineby perforations fr/5,861'-6,483' w/500 gals 15% NEFE HCL acid. Swab'd well. Ran pump & rods. Tbg landed @ 6,446'. Returned well to ppg.

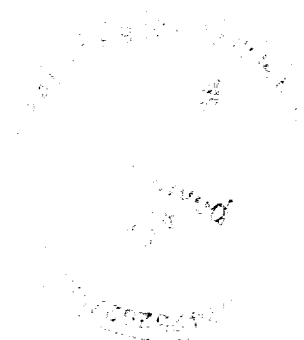
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Ray F. Martin TITLE Operations Engineer DATE 1/10/97  
TYPE OR PRINT NAME Ray F. Martin TELEPHONE NO. (915) 682-8873

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

JAN 15 1997



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