Submit 3 Copies to Appropriate District Office

State of New Mexico Minerals and Natural Resources Department Ene

Form C-103

CONDITIONS OF APPROVAL, IF ANY:

			Revised	1-1-89
CII	4 DV 110	 		

- DATE -

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATION 310 Old Santa Fe Tra Santa Fe, New Mex	il, Room 206	WELL API NO. 30-025-29048			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		5. Indicate Type of Lease STATE FEE XX				
			6. State Oil & Gas 1			
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO (FORM C-101	7. Lease Name or Unit Agreement Name					
1. Type of Well: Oil. WELL X WELL 2. Name of Operator	OTHER		Christmas			
CROSS TIMBERS OPERATING	COMPANY		8. Well No.			
3. Address of Operator P. O. Box 52070 Mid1 4. Well Location	and, Texas 79710-2	2070	9. Pool name or Will Monument T			
Unit Letter A : 380 Section 7	Feet From The North Township 20S P	Line and420	Feet From TI	ne <u>East</u>	Line	
	10. Elevation (Show whether 3,567.5 GR	DF, RKB, RT, GR, etc.)	NMPM Lea		County	
NOTICE OF INTEN	ropriate Box to Indicate I	Nature of Notice, Re	eport, or Other D SEQUENT REF	ata PORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	AL	TERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. DPL	UG AND ABANDOI	NMENT	
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB					
OTHER:		OTHER: Recomple			X	
12. Describe Proposed or Completed Operations work) SEE RULE 1103. RU workover rig. Instal fr/5,848'-5,872' w/75 sx Drilled out sqz job. Tst Unable to release RBP. (0 6,635' w/3 sx cmt on to 90', 92', 94', 96', 6,542 l5% NEFE w/23 BS. Frac'd 16/30 Ottawa sd. RIH w/E NU WH. Swab well in. St	led BOP. Set pkr @ Cl "C" cmt w/2% CaC t'd sqz to 1000 psig Cutover RBP. Unable pp. Perf Tubb zone 2', 44', 51' & 52' (d Tubb perfs w/28,20	5,601'. Squeeze 1 ₂ lead + 50 sx . Held OK. Cle to fish RBP. F 1 jspf @ 6,460', Ttl 15 holes). 0 gals 35# Borat	ce cemented Black Cl "C" neat of the ceanout to top Pushed RBP to Acidized Tubbace XL gel wtr	inebry performt tail. Work tail.	s WOC. ,476'. t CIBP ', 88',	
Thereby contifus that the fire						
I hereby certify that the information above is true and com						
, and the second		<u> Operations F</u>	ngineer	DATE 4/23/9	16	
TYPEOR PRINT NAME Ray F. Marti			TELEPHONE NO. (9]5) 682-8873		
(This space for State Use)				AUG 15 19	9.	