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 Office				
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		ATION DIVISION	WELL API NO.	
P.O. Box 2088 Santa Fe. New Mexico 87504-2088			30-025-30793	
O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	ı		6. State Cill & Gas Lease No.	
SUNDRY NO	TICES AND REPORTS O	N 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	
1. Type of Well: OIL GAS GAS			- Kyte	
MEIT [V] MEIT	OTHER			
 Name of Operator Stevens & Tull, Inc 	c.		8. Well No.	
3. Address of Operator P.O. BOX 11005, M	**************************************	2	9. Pool name or Wildcat D-K Abo	
4. Well Location	00 Fact	Line and 198	80 South	
Unit Letter : : :	80 Feet From The East	Line and 190	80 Feet From The South Line	
Section 23	Township 20-S	Range 38-E	NMPM Lea County	
	10. Elevation (Show 3566.5	whether DF, RKB, RT, GR, etc.) GR		
11. Checl	k Appropriate Box to Ind	······································	Report, or Other Data	
	NTENTION TO:	•	BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	TEOGRAD ADAIDONNIENT	
PULL OR ALTER CASING		CASING TEST AND C	CEMENT JOB (C.)	
OTHER:		OTHER:		
	erations (Clearly state all pertinent of	details, and give pertinent dates, inci	luding estimated date of starting any proposed	
work) SEE RULE 1103. 1) Drill 12 1/4'	hole with fresh mud			
2) Set 8 5/8" cas				
3) Cemented with	500 sacks class "C"	light with 1/4 # c	ellophane and 200 sacks class "C"	
	1/4# cellophane.			
4) Wait on cement				
5) Test BOP to 10	00 psi. for 30 minu	tes.		
6) Drill out with	Brine mud.			
I hereby certify that the information above is	true and complete to the best of my know			
SIGNATURE Hochuy &	! Seale	Engineer	DATE	
Rodney			TELEPHONE NO. 915/699-14	
TYPE OR PRINT NAME			IELE INNE NO.	

___ TITLE --

(This space for State Use) ORIGINAL SIONED BY JERRY SEXTON

DISTRICT | SUPERVISOR

- DATE -

APPROVED BY ----CONDITIONS OF APPROVAL, IF ANY: