

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

Well API NO. 30-025-31986
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-2667
7. Lease Name or Unit Agreement Name Ottawa State
8. Well No. 1
9. Pool name or Wildcat Wildcat Delaware

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Dry	2. Name of Operator Siete Oil and Gas Corporation
3. Address of Operator P.O. Box 2523, Roswell, NM 88202-2523	4. Well Location Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line Section 3 Township 22S Range 32E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3797' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input 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.

Siete Oil and Gas intends to plug the above captioned well as follows:

1st plug: 40 sxs "C" Neet @ 8705'-8600'
2nd plug: 40 sxs "C" Neet @ 7000'-6900'
3rd plug: 40 sxs "C", 4% CaCl @ 4250'
4th plug: 30 sxs "C" Neet @ 750'-650'
5th plug: 10 sxs "C" Neet @ 35'-surface

Cut off wellhead, install dry hole marker. Received verbal on above procedure from Paul Kautz w/OCD.

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

SIGNATURE Cathy Batley-Seely TITLE Reg. Spec. DATE 8/16/93
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 19 1993

CONDITIONS OF APPROVAL, IF ANY:

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