Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

CONDITIONS OF APPROVAL, IF ANY:

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVAT		WELL API NO.
P.O. Box 2		30-025-32462 7
P.O. Drawer DD, Artesia, NM 88210	0 87504-2088	5. Indicate Type of Lease  STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	•	6. State Oil & Gas Lease No. LG-893
SUNDRY NOTICES AND REPORTS ON W		
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP DIFFERENT RESERVOIR. USE "APPLICATION FOR (FORM C-101) FOR SUCH PROPOSALS.)	EN OR PLUG BACK TO A PERMIT	7. Lease Name or Unit Agreement Name
1. Type of Well:		New Mexico
OIL GAS WELL OTHER		DW State
2. Name of Operator Stevens & Tull, Inc.		8. Well No.
3. Address of Operator		9. Pool name or Wildcat
P. O. Box 11005, Midland, TX 79702		Wildcat
Unit Letter E : 1980 Feet From The North	Line and 660	Feet From The West Line
Section 6 Township 22-S	Range 35-E	103
	her DF, RKB, RT, GR, etc.)	NMPM Lea County
11. Check Appropriate Box to Indicate	e Nature of Notice R	eport or Other Data
NOTICE OF INTENTION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING	CASING TEST AND CE	
OTHER:	OTHER: Comple	tion - Upper Yates X
12. Describe Proposed or Completed Operations (Clearly state all pertinent details	and give pertinent dates, include	ding estimated date of starting any proposed
work) SEE RULE 1103.	• •	, , , , , , , , , , , , , , , , , , ,
4/21/94 - Set CIBP @ 3836'. No cement on to 3750'-3780', 3801'-3829' w/2SPF. NEFE. Swab dry w/good shows of or	lotal 176 holes.	per Yates 3700'-3730', Acidize w/3000 gals 15%
4/26/94 - Frac w/85,000# 16/30 sand, 43,000 ISIP=2250#, 15 min=2100#. Flow ar oil and gas. Prepare to potential	gals gel, and 299 nd swab back Frac	5,500 CFM N <sub>2</sub> at 25 BPM. fluid with good shows of
I hereby certify that the information above is true and complete to the best of my knowledge	and belief.	
SIGNATURE Mychael De Moussey	mus Engineer	DATE 5/2/94
TYPE OR PRINT NAME		TELEPHONE NO.
(This space for State Use)		WAY CO 1994
	ORIGINAL SIGNED	PATE DATE
APTROVED BY	TITLE	DATE

POCENIE!

## Submit 3 Copies to Appropriate

## State of New Mexico

Form C-103 Revised 1-1-89

APPROVED BY .....

CONDITIONS OF APPROVAL, IF ANY:

Enc. \_\_\_\_\_, Minerals and Natural Resources Department

District Office	-	*****
DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DD, Artesia, NM 88210  OIL CONSERVATION DIVISION 310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503		WELL API NO.
		30-025-3246 <b>2</b> 7  5. Indicate Type of Lease
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		STATE X FEE 6. State Oil & Gas Lease No.
		LG-893
SUNDRY NOTICES AND REPORTS ON WE (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN DIFFERENT RESERVOIR. USE "APPLICATION FOR PE (FORM C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name  New Mexico
1. Type of Well:		DW State
OIL X GAS WELL OTHER  2. Name of Operator		
Stevens & Tull, Inc.	•	8. Well No. 2
3. Address of Operator		9. Pool name or Wildcat
P. O. Box 11005, Midland, TX 79702  4. Well Location		Wildcat
Unit Letter E: 1980 Feet From The North	Line and 660	Feet From The West Line
	25.5	
Section 6 Township 22-S R		NMPM Lea County
3620 GR	, , , ,	
11. Check Appropriate Box to Indicate		
NOTICE OF INTENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CE	
	Comple	etion - Lower Yates X
OTHER:	J OTTILL	
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pertinent details, work) SEE RULE 1103.</li> </ol>	and give pertinent dates, incl	uding estimated date of starting any proposed
4-20-94 - Perforate 3839 - 3917' (total 40 h 15% NEFE. ATP=2400#, AIR=4.2 BPM, formation dry. No fluid entry. N Lower Yates and test Upper Yates f	, ISIP=1600#, 15 No shows of oil o	min. SIP=1500#. Swab
I hereby certify that the information above is true and complete to the best of my knowledge and be SKINATURE  TYPE OR PRINT NAME	elief. mue Engineer	DATE 5/2/94 TELEPHONE NO.
(This space for State Use)	ONION	
	OKIGINAL SIGN	ED BY JEDRY SEXENN MAY 0.5 1994

... TITLE ...