Submit 3 Copies to Appropriate District Office

DIGILL OF THEM THERED Energy, "finerals and Natural Resources Department

Form C-103 Revised 1-1-89

DIST	RICI	U			
P.O. E	ox 1	1980,	Hobbs,	NM	8824

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

OIL CONSERVATION DIVISION

2040 Pacheco St.

NM 87505 Santa Fe,

WELL API NO. 30-025-33706

5. Indicate Type of Lease STATE FEE X

DISTRICT III 1000 Rio Brazos Rd., Aztoc, NM 87410	6. State Oil & Gas Lease No.					
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 7. Lease Name or Unit Agreement Name					
1. Type of Well: OR. GAS WELL WELL OTHER	Payday					
2 Name of Operator Collins & Ware, Inc.	8. Well No.					
3. Address of Operator 508 West Wall, Suite 1200, Midland,	9. Pool name or Wildcat Warren; Tubb, East (Gass)					
4. Well Location Unit Letter L : 1980 Feet From The South	Line and 660 Feet From The West Line					
<i>'////////</i>	Range 38E NMPM Lea County					
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK XX ALTERING CASING					
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. DPLUG AND ABANDONMENT					
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB					
OT HER :	OTHER: Completion X					
 Describe Proposed or Completed Operations (Clearly state all pertinent details work) SEE RULE 1103. 	, and give pertinent dates, including estimated date of starting any proposed					
2/10/97 Spot 500 gals 15% Ferchek acid from TD to 2800'.	6820' - 6320'. Tag PBTD at 6902'. Run GR/CCL					

- 2/11/97 Perforate Tubb interval 6488' 6814' (90 shots). Set RTTS at 6365'. Acidize perfs with 4000 gals 15% Ferchek SC.
- 2/14/97 Fracture treat well with 108,000 gals Delta-Frac 25 carrying 275,000# 16/30 Brady sand.

I hereby certify that the information above in true and complete to the best of my knowledge and believes	Prodution Supervisor	2/20/97 DATE
TYPEOR PRINT NAME Dianne Sumrall		TELEPHONE NO. (915) 687-343
(This space for State Use)		
APPROVED BY TITLE -		DATE
CONDITIONS OF APPROVAL, IF ANY:		