State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office				Revised 1-1-89
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION	N DIVISION		
DISTRICT II	P 0. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 300250478	2
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease	ALE TEE
			B-935	
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'			7. Lease Name or Unit A	greement Name
<u> </u>	MC-101) FOR SUCH PROPOSALS.)		NEW MEXICO G S	TATE
I. Type of Well: OIL X GAS WELL	OTHER			
2. Name of Operator	RPORATION		8. Well No.	
2 Address of Operator ATTN: REGULATORY AFFAIRS ML#14			9. Pool name or Wildcat	
P. O. BO MIDLAND.	X 1600		EUMONT YATES 7	'RVRS QN (PRO GAS)
4. Well Location				
Unit Letter 2 : 660 Feet	From The FSL Line and	660 Feet 1	From TheFEL	Line
Section 26	ownship 21 S Range		M LEA	County
	10. Elevation (Show whether 3557 (11 -			
			Depart or Other	Doto
	ppropriate Box to Indicate N			
NOTICE OF I	NTENTION TO:	SUB	SEQUENT REI	PURT UF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS.	PLUG & ABANDONMENT
PULL OR ALTER CASING]	CASING TEST ANI	D CEMENT JOB	
OTHER:	🗆	OTHER:		
12. Describe Proposed or Completed Operawork) SEE RULE 1103.	ations (Clearly state all pertinent details, and	give pertinent dates, includi	ng estimated date of startin	g any proposed
	AND TEST CLASS III	BOP. POH WI	TH TUBING AN	D PACKER.
2. PU RIH WITH 5 3. PUMP 110 SXS	5-1/2" CEMENT RETAIN OF CLASS "C" NEAT C	EMENT BELOW	RETAINER.	
4. STING OUT OF	RETAINER PLACE 25 SA	AKS CEMENT OF	N TOP OF RET	AINER.
	PERFORATING GUN PERF 5-1/2" CEMENT RETAIN	l' INTERVAL	a 1530'. N'	
	CEMENT THROUGH CEME		•	
8. STING OUT OF	RETAINER PLACE 25 SA	AKS CEMENT OF	N TOP OF RET	AINER.
9. RU RIH WITH F	PERFORATING GUN PERF	1' INTERVAL	a 370'.	A
10. RIH WITH TUB	ING AND CIRCULATE CEI	MENT TO SURF	ACE THROUGH Teel Diate I	ALL ANNULUS.
11. CUT OFF CASIN	ONS ON IT. CLEAN LOCA	ATION.	IEEL PLAIL L	LOAL
IDENTIAL IONIA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
I hereby certify that the information above-is t	rue and complete to the best of my knowledge and			05150707
SIGNATURE HAVON	5 Jimlin TITLE	SR.STAFF OFFICE		DATE 05159/96
TYPE OR PRINT NAME SHARON	B. TIMLIN	(9	15) 688-6166	TELEPHONE NO.
(This space for State Use) ORIGINAL SIG	NED BY ISDBY SEVENI			
DISTRIC	T I SUPTRVISOR			MAV 9 A 400c
APPROVED BY	TITLE	·		MAY 2 0 1996

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