Submit 3 Copies to Appropriate District Office

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

Form C-103 Revised 1-1-89

DISTRICTI

OIL CONSERVATION DIVISION WELL ARRANGE

P.O. Box 1980, Hobbs, NM 88240 P.O. Box	Santa Fe. New Mexico 87504-2088		30-025-06661  5. Indicate Type of Lease	
DISTRICT II i.O. Drawer DD, Artesia, NM 382.0  Santa Fe, New Mexic				
		STATE	FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		6. State Oil & Gas Lease No.		
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.)		7. Lease Name or Unit Agreement Name		
I. Type of Well: OIL GAS WELL X WELL OTHER		Alves		
2. Name of Operator		8. Well No.		
Hawkins Oil & Gas, Inc.		9. Pool name or Wildcat		
3. Address of Operator  ADD South Booton Suite 200 Tules OV 7/103		Penrose Skelly Grayburg		
400 South Boston, Suite 800 Tulsa, OK 741	03	THEIT USE SKETTY WIN	ybui q	
Unit Letter H: 1980 Feet From The north	Line and 660	Feet From The <u>eas</u>	tLine	
Section 18 Township 21S	Range 37E	имим Lea	County	
10. Elevation (Show when	ther DF, RKB, RT, GR, etc.)  *GL			
11. Check Appropriate Box to Indica	te Nature of Notice, F	Report, or Other Data		
NOTICE OF INTENTION TO:		SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	REMEDIAL WORK		
TEMPOPARILY ABANDON CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND	ABANDONMENT .	
PULL OR ALTER CASING CASING TEST AND C		EMENT JOB		
OTHER:	OTHER:			
12 Describe Proposed or Completed Operations (Clearly state all pertinent details work) SEE RULE 1103.  Proposed Work:  Place 100' cement plug above perforations (Cut off 7" casing at approximately 1500' Place cement plug 50' in and 50' out of case Place 100' cement plug above salt (201340' Place 100 sack plug at surface, install proposed up location  Work scheduled to begin on or before August	3692'-3723', plusing 1550'-1450' plug 1300'-1200' per marker 1, 1991.	ig 3692'-3592'		
I hereby certify that the information above is true and complete to the best of my knowledge	e and belief.		-	
		erintendent DATE	5-30-91	
TITE OR PRINT NAME T. J. Diseker			NE NO. 316-624-83	
(This space for State Use) GRIGINAL RENEW SEXTON			kg A	
DISTRICY   SUPERVISOR			7 : "	
ALTROVED BY	TITLE	DATE		

AITROYED BY ----