Submit 3 Copies to Approriate District	State of New Mer Energy, Minerals and Natu		
DISTRICTI			FORM C-10
16.5 N. French Dr., Hobbs, NM 88240			Revised March 25, 199
DISTRICT II	OIL CONSERVATION DIVISION		WELL API NO.
311 South First, Artesia, NM 88210	2040 South Pacheco		30-025-09917
DISTRICT III	Santa Fe, NM 87	7505	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
DISTRICT IV			6. State Oil & Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505			
SUNDRY 1	NOTICES AND REPORTS ON WEL	LS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "AI	PPLICATION FOR PERMIT" (FORM C-101) F	FOR SUCH	
PROPOSALS.)			Northeast Drinkard Unit
1. Type of Well:		T • 4•	
OIL WELL	GAS WELL OTHER	Injection	
2. Name of Operator			8. Well No.
Anache Corporation		WFX-759	704
3. Address of Operator			9. Pool name or Wildcat
2000 Post Oak Blvd., Ste. 100). Houston. Texas 77056-4400		Eunice N., Blinebry-Tubb-Drinkard
4. Well Location			
Unit Letter <u>N</u> :	660 Feet From The South	Line and 1980	Feet From The West Line
Section 15 T	Cownship 21S Range 37	7E NMPI	M Lea County
	10. Elevation (Show whether DF, RKB, R	XT, GR, etc.)	
	3418' GR		
11.	Check Appropriate Box t	o Indicate Nature of Notice	
NOTICE OF IN	ITENTION TO:	SUE	BSEQUENT REPORT OF:
Perform Remedial Work	Plug and Abandon	Remedial Worl	k 🔲 Altering Casing
Temporarily Abandon	Change Plans	Commence Dr	illing Operations
Pull or Alter Casing		Casing Test an	nd Cement Job
Other		☑ Other	Convert to Injection
12. Describe proposed or compl			

of recompletion.				
10/13/00	MIRU. Pull out of hole w/ production equipment			
10/16/00	Pick up bit & scraper. Run in hole to 6630'. Pull out of hole			
10/17/00	Run in hole w/ packer & set @ 5667'. Load backside & pressure test to 500# for 15 mins - OK. Release packer & pull out of hole			
11/2/00	Run in hole w/ 2-3/8" polylined tubing & packer, set packer @ 5654'. Load backside w/ packer fluid. Test to 300# for 30 minutes - OK. Hook well up to injection system. Put on injection.			
11/30/00	Ret to 520# for 30 minutes - OK. (See attached) - Return to injection			
	Requested water press = 3-0'			
I hereby certify that the inform SIGNATURE	String shove is true and completed to the best of my knowledge and belief.			
TYPE OR PRINT NAME	Debra J. Anderson <u>TELEPHONE NO.</u> 713-296-6338			
(This space for State Use)	······································			
APPROVED BY	TITLE DATE			
CONDITIONS OF APPROVA	IL IF ANY:			
JCSN				

