Submit 3 Copies to Appropriate District Office

State of New Mexico Ene. , Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88:140

OIL CONSERVATION DIVISION

P.O. Box 2088	30-025-29514
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease
DISTRICT III	STATE FEE X
1000 Rio Brazos Rd., Aztec, 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"	7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OR. GAS WELL X WELL OTHER	1
2. Name of Operator	J. A. Akens
Oryx Energy Company	8. Well No. 12
3. Address of Operator	9. Pool name or Wildcat
P. 0. Box 1861, Midland, TX 79702 4. Well Location	Hardy Tubb Drinkard
Unit Letter X: 660 Feet From The South Line and	330 For From The Fried
_	SSU Feet From The <u>East</u> Line
Section 3 Township 21-S Range 36-F 10. Elevation (Show whether DF, RKB, RT, C. etc.)	NMPM Lea County
3553 GR	
11. Check Appropriate Box to Indicate Nature of Notice, R	enort or Other Data
	SEQUENT REPORT OF:
	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	GOPNS. U PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND C	EMENT JOB
OTHER: Stir	ulate
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, inclu	
WOFK) SEE RULE 1103.	ding estimated date of starting any proposed
1/8/91 MIRU X-pert WS. Steam out paraffin.	
1/9/91 Tag fill at 6915', 30' fill, unable to break circ, d	rop std valve, test the to
2800 psi OK, fish std valve.	
1/10/91 FOH w/tbg, LD bit & csg scraper.	
1/11/91 Press annulus to 500 psi, BJ acidize perfs 6554-6880 mixture. Swab.	'w/7500 qal 85/15 acid-xylene
1/12/91 RIH w/2 $\frac{1}{2}$ x1 $\frac{1}{4}$ x20' pump on 66 rod string. Press to 500	
.3 thru 1/23/91 Pumping.	nci NK Du+ wall as ±aa±
.) LUCIL 1// 3/91 PIUNDINO	psi, OK. Put well on test.
, ,	psi, OK. Put well on test.
1/24/91 24P 16 BD 56 BW 148 MCF.	psi, OK. Put well on test.
1/24/91 24P 16 BI) 56 BW 148 MCF. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	psi, OK. Put well on test.
1/24/91 24P 16 BD 56 BW 148 MCF.	
1/24/91 24P 16 BD 56 BW 148 MCF. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
1/24/91 24P 16 BD 56 BW 148 MCF. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Provation A	nalyst _{date} 2-1-91 TELEPHONE NO. 915/688-0
1/24/91 24P 16 BO 56 BW 148 MCF. Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Proration A TYPE OR PRINT NAME Maria L. Perez	nalyst DATE 2-1-91