Submit 3 Copies To Appropriate District Office	State of New M	exico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Nat	ural Resources	Revised March 25, 1999
District II	OII CONCERNA MA		API NO. 29725
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		30-025-0c-4644 icate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	1220 South St. Francis Dr.		STATE   FEE
1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		ate Oil & Gas Lease No.
87505 SUNDRY NOTICES AND REPORTS ON WEST AS			1-1902
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			se Name or Unit Agreement Name:
1. Type of Well:	Thorosacs.		
2. Name of Operator			
	0:1 Co.		I name or Wildcat
4. Well Location  9. Pool name or Wildcat  Wilson 4 tes Seven Rivers			
Unit Letter W: 330 feet from the South line and 1650 feet from the EAST line			
Section			1
Section 6 Township 2/- S Range 35-F NMPM County Le A  10. Elevation (Show whether DR, RKB, RT, GR, etc.)			
11 Check Appropriate Devite Indian No.			
11. 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	ENTREPORT OF:  ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS. PLUG AND
PULL OR ALTER CASING	MULTIPLE  COMPLETION	CASING TEST AND CEMENT JOB	ABANDONMENT
OTHER:	П	OTHER:	
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or			
*	600' the	tyna Chileograf Nom	
30 D SXS @ 1990-1700 (3A1+)			
25 0 5x5 @ 465-	365	Thurston,	FEB 2002
105x5 @ 60 - =	SUFFACE	(	Promise LED 5005
,,	10# Brine	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Hobbs //
	10# Drive	\center \cente	OCD -
	10011		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE SIGNATURE	TITLE	HGENT	DATE 2-11-02
Type or print name Rickey	Sm, th	/	915 Telephone No. 586-3076
(This space for State use)		Ethoropia survey	Telephone 140. 586.3076
APPPROVED BY	TITLE		DATEEB 1 1 2002
Conditions of approval, if any:	111111111111111111111111111111111111111		DAIFED 1 1 LOOP