Submit 3 Copies to Appropriate District Office

State of New Mexico erals and Natural Resources Department Energy,

DISTRICT I

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

Fort	n C	-1u	3
Revi	sed	1-1	-89

WELL API NO.

P.O. Box 1980, Hoods, 1981 88240	P.O. Box		30-025-31117		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexi	co 87504-2088	5. Indicate Type of Lease STATE XX	FEE 🗌	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No. B-2456, B-1637, A-13		
OLINDRY NOTICE	S AND DEPORTS ON V	VELLS			
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 N	атте		
1. Type of Well: OIL GAS WELL X	OTHER		State "A" Com	· · · · · · · · · · · · · · · · · · ·	
2. Name of Operator			8. Well No.		
Doyle Hartman			0. Pool name or Wildrat		
3. Address of Operator		9. Pool name or Wildcat Eumont (Y-7R-Qn)			
P. O. Box 10426, Midl	and, Texas /9/02		Edmont (1-/K-Qii)		
4. Well Location Unit Letter Q : 1650	Feet From The South	Line and845	Feet From TheEast	Line	
	21.0	Range 37E 36	NMPM Lea	County	
Section 5	Township 21S	Range 375 6 ether DF, RKB, RT, GR, etc.)	MAINM HEA		
		5.2 GR	<i>\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
	opropriate Box to Indicate		eport or Other Data		
			SEQUENT REPORT OF	Ξ.	
NOTICE OF INTE	NTION TO:	301	<u></u>	_	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CAS	Γ-	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN		ANDONMENT L	
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB L	-	
		OTHER:	OTHER:		
OTHER:				msed	
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	ns (Clearly state all pertinent deta	ils, and give pertinent dates, incl	uaing estimatea aate oj starting any proj	poseu	
blend of gelled water	r and CO2 carrying	532,380 lbs of sa	ll with 225,319 gals ond at an average rate it to recover load. R	of 3/.33	
	0				
I hereby certify that the information above is true	and complete to the best of my knowle	dge and belief.		F 20 01	
		mueEngine	eer DATE	5-20-91	
SIONATURE	-7-			NO.	
TYPE OR PRINT NAME Micha	el Stewart		TELEPHONE		
(This space for State OR) GINAL SIGNED DISTRICT IS			MAY	2 8 199 ₁	
APPROVED BY		TILE	DATE	1001	