Submit 3 Copies to Appropriate District Office

Type of Well:

2. Name of Operator

3. Address of Operator

Well Location

11.

OTHER:

P.O. BOX 2880,

Section 3

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

work) SEE RULE 1103.

02/17/96 SPUD DATE

RR @ 2:30 AM

WO CMT 4 HOURS

02/24/96 MIRU COMPLIETION RIG

CONT DRILLING @ 2:00 PM

MET

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

ORYX ENERGY COMPANY

MET X

OIL CONSERVATION DIVISION WELL API NO. P.O. Box 2088 30-025-33279 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATE X FEE 🗌 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) J. A. AKENS OTHER 8. Well No. 9. Pool name or Wildcat DALLAS, TX 75221-2880 **EUMONT YATES 7 RVS QN (PRO GAS** Unit Letter R : 1980 Feet From The SOUTH 1825 Feet From The EAST Line and Line County Township 21 Range 36E NMPM LEA 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3549 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHER:_ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed RAN 11 JTS 8 5/8 24\$ CST TO 491' W/ 300 SX CMT 02/18/96 PUMP 75 SX CMT, DISP 5 SX TO PIT 02/19/96 - 02/22/96 DRILLING 02/23/96 RAN 85 JTS 5_1/2 15.5# CSG TO 3700 65 SX CMT, TAIL WITH 250 SX CMT CIRC 38 SX TO PIT

I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
MONATURE Daniele Bury	TITLE PRORATION ANALYST	DATE 03/22/96
TYPE OR FRENT NAME DANIELE BURRIS		TELEPHONE NO.214 715-3242
(This space for State Use)		MAR 2 6 1996
ORIGINAL SIGNED DY JERRY SEXTON		TANK D 1000
APPROVED BY DISTRICT I SUPERVISOR	mue	DATE
CONDITIONS OF APPROVAL, IP ANY:		

