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State of New Mexico

Form C-103

MAN 3 1997

_ DATE __

to Appropriate District Office	Energy, arals and Natural Re	esources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.
DISTRICT II			30-025-34144
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III			5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. E - 1673
SUNDRY NOTIC	ES AND REPORTS ON WE	LS	
(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 Name
1. Type of Well:	or, conducting the contract of		STATE 33
OIL GAS WELL 2. Name of Operator	OTHER		
RAND PAULSON OIL COMPANY, INC.			8. Well No. 2
Address of Operator 508 W. WALL, STE 100 MIDLAND, TX 79701			9. I'dol name or Wildcat GRAMA RIDGE
4. Well Location F 198	Preet From The NOIZTH	Line and 23	O Feet From The WEST Line
Section 33		フ ロ_ C	. 1 = 1
	10. Elevation (Show whether	DF, RKB, RT, GR, esc.)	NMPM County
Charle A	/////	621'GR -	
II. Check A NOTICE OF INTE	ppropriate Box to Indicate 1	i .	_
	ATION TO.	306	SEQUENT REPORT OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
OTHER:		CASING TEST AND CE	MENT JOB
		OTHER:	
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	ns (Clearly state all pertinent details, an	d give pertinent dates, includ	ling estimated date of starting any proposed
10-26-97 DRILL	834" HOLE TO 11.1	15' RAN 7"	23 LBS N-80 \$ 5-95 CASINO
TO TD. COMBUTED	IN 2 STAGES: 2	50 SX H: POZ	65:35+6% GEL + 5% SALT AUG
TAIL W/ 200 SX CLAS	SH. ZUP STAGE: 600	25x A< IN STAG	FI. TAN W/200 EX CLASS H
WOC. CUT OFF CS	S. NU WELL HEAD &	BOD TEST &	OF 4500 PSI + HEAD TO 5000 F
			-OK. PREP TO DRILL OUT
w/6/8" O.H.	= manorable (resi	(0.000)	
I hereby certify that the information above is true a	ad complete to the best of my knowledge and	1	
SIGNATURE MICROSCO	m	. AGENT	DATE 10-28-97
TYPE OR PRINT NAME O. H.	2 outh		715 TELEPHONE NO.6 \$ 7-0323

CONDITIONS OF AFFROVAL, IF ANY:

(This space for State Use)