

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	WELL API NO.
2. Name of Operator Hal J. Rasmussen Operating, Inc.	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 6 Desta Drive, Suite 5850, Midland, Texas 79705	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>0</u> : <u>650</u> Feet From The <u>South</u> Line and <u>1950</u> Feet From The <u>East</u> Line Section <u>9</u> Township <u>23 S</u> Range <u>36 E</u> NMPM Lea County	7. Lease Name or Unit Agreement Name State "A" A/C 1
	8. Well No. 12
	9. Pool name or Wildcat Jalmat - TNSL-YTS-7R
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

6/12/89 RIH w/ tbg & bailer, clean out hole, POH, acidize w/ 1500 gal. put on pump;

Before: TA'd

After: 3.92 BO, 75.3 BW, 30 MCF in 24 hours

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jay D. Cherski TITLE Agent DATE 10/24/89

TYPE OR PRINT NAME Jay D. Cherski

TELEPHONE NO. 915-687-1664

(This space for State use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 30 1989