State of New Mexico

Form C-165 Energy, Minerals and Natural Resources Department Revised 1-1-39 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30 025 09314 DISTRICT II Santa Fe. New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) State A A/C 1 Type of Well: GAS WELL WELL X OTHER 8. Well No. 2. Name of Operator 68 Clayton W. Williams, Jr., Inc. 9. Pool name or Wildcat 3. Address of Operator Six Desta Drive, Suite 3000 Midland, Texas 79705 Langlie Mattix 7R Queen GB 4. Well Location 990 Feet From The 990 Feet From The North Line and 11 **NMPM** Lea County Rang Township Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3551 KB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON X **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER:_ 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. Estimated Start Date: 6/29/92 Load 7" casing with field salt water. (CIBP set at 3583'.) Pressure test casing from surface to 3583' to 500 psi for 30 minutes. (Record test on chart for OCD subsequent report.) Temporarily abandon wellbore for future use. THE COMMISSION REPOT BE NOTIFIED 24 HOURS PRICE TO COMMENCING WORK I hereby certify that the information above is true and complete to the best of my knowledge and belief. mme Production Engineer ___ DATE <u>6-25</u>-92 SIGNATURE

TELEPHONE NO. 682-6324 TYPE OR PRINT NAME David G. Grafe (This space for State Use) DATE APPROVED BY --- TITLE -CONDITIONS OF APPROVAL, IF ANY: