Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 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.)		WELL API NO.	
		30-025-09342	
		5. Indicate Type of Lease STATE X FEE	
		6. State Oil & Gas Lease No.	
		7. Lease Name or Unit Agreement Name ACC State "A" Account #1	
1. Type of Well: OR. GAS WELL X OTHER			
2. Name of Operator		8. Well No.	
Clayton W. Williams, Jr., Inc.		9. Pool name or Wildcat	
3. Address of Operator 6 Desta Drive, Suite 3000, Midland, Texas 79705		Jalmat-TNSL-YTS-SR	
	5 t. Line and 19	80 Feet From The West Line	
Section 13 Township 23S	Range 36E	NMPM Lea County	
Section 13 Township 23S Range 36E NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.)			
3370 GL			
11. Check Appropriate Box to Indic	ate Nature of Notice, I	Report, or Other Data	
NOTICE OF INTENTION TO:	SUI	BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	X REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING CASING TEST AND CEMENT JOB		CEMENT JOB	
OTHER:	OTHER:		
12. Describe Proposed or Completed Operations (Clearly state all pertinent dete	oils and give pertinent dates, inc	luding estimated date of starting any proposed	
work) SEE RULE 1103. Estimated Start Date: Upo			
1) Set CIBP @ ± 2800'. Dump bail 10' of cement o	on CIBP.		
2) Circulate 9.5# gelled brine from CIBP to surface. (± 175 B)			
3) Perf the 8-5/8" csg @ \pm 275'. Circulate cemer	nt to surface (± 200 s.	x Class C W/ 2% CaCl2).	
4) Cut 13-3/8" & 8-5/8" csg 3' below G.L. and set	PNA marker in cement		
^			
I hereby certify that the information above is true and complete to the best of my knowle	edge and belief.		
I hand trale		num Engineer DATE 12-8-92	
SIGNATURE			
TYPEOR PRINT NAME David Grafe		TELEPHONE NO.	
(This space for State Use)			
CRIGINAL SENED BY JERRY SEXTON		DEC 0 9 '92	
BISTRICT I SUPERVISOR	mu	DATE	
AND A COUNTY OF THE COUNTY OF			

RECEIVED
DEC 0 9 1992

OCD HOBBS OFFICE