Submit 3 Copies to Appropriate District Office	State of New Mexico E1. , y, Minerals and Natural Resources Departmen.		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 CONSERVATIO 2040 Pacheco Santa Fe, 8	St.	WELL API NO.      30-025-10173      5. Indicate Type of Loase      STATE      FEE      G. 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 RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name BRUNSON-ARGO		
WEL  WEL  OTHER    2. Name of Operator			8. Well No. 5 9. Pool name or Wildcat PADDOCK		
4. Well Location      Unit Letter    F      10    Township      22-S    Range      37-E    NMPM      Line    Line      Section    10      Township    22-S      Range    37-E      NMPM    Lea      County					
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3413' GR					
11. Check Appropriate Box to Indicate Nature of Notice, R NOTICE OF INTENTION TO: SUE			eport, or Other Data		
	PLUG AND ABANDON	REMEDIAL WORK			
PULL OR ALTER CASING					
		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.

Perforate additional pay in Paddock and acidize

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2/4/97	MIRU pulling unit. POOH with rods, pump and tubing. RIH with 3-7/8" bit, clean-out bailer
	and 2-3/8" tubing. Tagged fill at 5172'. (Perfs: 5082' - 5205') Cleaned out to 5182'. Hit
	metal. POOH.
2/5/97	RIH with washover shoe. Washed over and fished 29 ft tubing.
2/6/97	Cleaned out to 5208'. RIH with packer. Set packer at 5070'. Swabbed well. Recovered iron
	sulfide, paraffin and emulsion.
2/7/97	Acidized perfs 5082' - 5205' with 3000 gal 15% HCl and paraffin chemical. Started swabbing
	well.
2/8/97	Made 35 swab runs. Recovered 42 Bbls load water. Oil cut 10%

I hereby certify that the information above is true and complete to the best of my is SIGNATURE	mowindge and balled. Project Manager	DATE 2/24/97
TYPE OR PRINT NAME Ron Lechwar		<u>телетноке но.</u> 915-682-66
(This space for State Use)		MAR 0 4 1997
APPROVED BY	TTLE	DATE

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