## State of New Mexico Energ: inerals and Natural Resources Department

Form C-103

OIL CONSERVATION DIVISION

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St.				WELL API NO. 30-025-10274			
DISTRICT II	Santa Fe, NM 87505			5. Indicate Type of Lease			
P.O. Drawer DD, Artesia, NM 88210				STATE FEE X			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas Lease No.			
SLINDRY NOT	TICES AND REPORTS ON	WELL	S		////////		
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7. Lease Name or Unit Agreement Name			
(FORM (	C-101) FOR SUCH PROPOSALS	.)		Walden	, EW		
Type of Well:  or.  well X well  well	OTHER						
Name of Operator	s & Ware, Inc.	· · · · · ·		8. Well No.	6		
3. Address of Operator				9. Pool name or Wil	dcat		
508 W. Wall, Suite 1	200, Midland, Texas	7970	01	Drinkard			
4. Well Location  Unit Letter M : 73	1 Feet From The Sout	:h	Line and	Feet From T	heWe	st. Line	
15	225	_	37E	>= CT (	Lea	Country	
Section (7////////////////////////////////////	I OMITEIND	Rat vhether L	of, RKB, RT, GR, etc.)	NMPM		County	
	//////	3396	' GR				
	Appropriate Box to Indi	cate N				_	
NOTICE OF IN	ITENTION TO:		SUB	SEQUENT RE	PORT OF	<del>-</del> :	
ERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	A	LTERING CAS	SING	
EMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING	LL OR ALTER CASING CASING TEST AND CEM						
OTHER:			OTHER: Zone a	bandonment		X	
12. Describe Proposed or Completed Ope	rations (Clearly state all pertinent de	etails, an	d give pertinent dates, incli	iding estimated date of s	starting any pro	posed	
work) SEE RULE 1103.							
This well was product at 6250! and dumped Effective November (C-115 as it has been	4 sx of cement on to 1, 1996, we will no	op 🕳	We then perfora	itea the princ	spia iio	( )4)0 )0/4•	
I hereby certify that the information above is	true and complete to the best of my know	viedge and	1 belief.				
SIGNATURE / Carm	Sumll	<u> </u>	ne Production S	upervisor	DATE	1/19/96	
TYPE OF PRINT NAME Dianne	Sumrall				TELEPHONE	ю. (915) 687 <u>-3</u> 4.	
(This space for State Use)					3	10 <b>v 25 199</b> 6	
APPROVED BY	<u> </u>	тг	TLE		DATE	10 1 2 0 1030	
CONDITIONS OF APPROVAL, IF ANY:					1	$\bigcap$	