Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Morrals and Natural Resources Department

Form	C	-103
Revise	d	1-1-5

1.0 6 2 1.0

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe. New Mexico, 87503

WELL API NO.	
30_025_10224	•

P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87503 DISTRICT III 1000 Rio Brazos Rd. Artes NM 57410		130-025-10334	
		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"		B-934 ////////////////////////////////////	
		7. Lease Name or Unit Agreement Name	
(FORM C-101) F 1. Type of Well:	OR SUCH PROPOSALS.)		New Mexico M State
OIL GAS WELL X	CITIER		
2. Name of Operator			8. Well No.
GP II Energy, Inc. 3. Address of Operator			9. Pool name or Wildcat
P. O. Box 50682 Mid 4. Well Location	lland, Tx. 79710		Jalmat Yates 7 Rivers
Unit Letter <u>M</u> : 660 Fe	et From The South	Line and <u>660</u>	Feet From The <u>West</u> Line
Section 17 To	ownship 22S R	ange 37E 1	NMPM Lea County
	10. Elevation (Show whether 3401 GR	DF, RKB, RT, GR, etc.)	
11. Check Appro	priate Box to Indicate	Nature of Notice Re	Proct or Other Data
NOTICE OF INTENT	ION TO:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	LUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON C	HANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING CASING TEST AND CEMENT JOB			
OTHER: <u>Deepen in same pay</u>	X	OTHER:	
 Describe Proposed or Completed Operations (Cl. work) SEE RULE 1103. 	early state all pertinent details, a	und give pertinent dates, inclu	ding estimated date of starting any proposed
On or About August 1, 19	96, MIRU		
TOH w/production equipme	nt		
Deepen to 3700'	•		
Stimulate			
Return to production		·	
I hereby certify that the information above is true and comple	te to the best of my knowledge and beli		
SIGNATURE John S. Will	77. U	ε President	DATE _7-29-96
THEORIGINI NAME George P. Mitch	nell .		TELETIONE NO. 915-684-4748

CONDITIONS OF AFFROVAL, IF ANY:

(This space for State Use)

APTROVED BY-