Submit 3 Copies to Appropriate District Office

State of New Mexico E....gy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT I	OIL CONSERVATI	ON DIVISION	
7	310 Old Santa Fe Tra	il, Room 206	WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87503			30-025-10373
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			5. Indicate Type of Lease STATE X FEE
			6. State Oil & Gas Lease No.
			B-934
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"			
			7. Lease Name or Unit Agreement Name
(FORM C-10	1) FOR SUCH PROPOSALS.)	ENMI	
1. Type of Well:			New Mexico M State
WELL X	OTHER		
2. Name of Operator GP II ENERGY INC			8. Well No.
3. Address of Operator			13
P O BOX 3531, MIDLA	ND TX 79702		9. Pool name or Wildcat
4. Well Location	, , , , , , ,		Ianglie Mattix SR Qn Grayburg
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line			
Inc Line			
Section 2.0.	Township 22S R	ange 37E	MPM Lea County
	10. Elevation (Show whether	•	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTER	ACPUAGE BOX TO INDICATE		
	ALION TO:	SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING			
PULL OR ALTER CASING CASING TEST AND CEMENT JOB			MENT JOB
OTHER:		OTHER: Disconti	nue Injection & Produce Well X
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.			
work) SEE RULE 1103.			
1. Discontinue injection into perforated interval.			
2. Kan production equipment 3-25-95			
3. Now producing well from perforated interval previously injected into.			
Law Saw Souton and allow 1-195			
ger prog sexion est action. 1-1-13			
per Jerry Sexton est allow. 1-1-95 (prod shown on C1150) that month			
proc	Thou in		
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	1		
I hereby certify that the information above in true and con	mplate to the hest of my branded as and the	inf	
· F1 //	11190 D	Naont	0.33.05
SKINATURE 2		Agent	DATE9-11-95
TYPE OR PRINT NAME	/		TELEPHONE NO.
This was factory V			- venes - 60/145 ITU.
(This space for State Line) QRIGINAL SECTION)/ P AN		
APPROVED BY DISTRICT I SUPE	AVISOR		SEP 26 toos
74 1 RU 1 EU 9 1		₹	

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