

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection well		7. Unit Agreement Name
2. Name of Operator Kirby Exploration Company of Texas		8. Farm or Lease Name New Mexico M State
3. Address of Operator P. O. Box 1745 Houston, Texas 77251		9. Well No. 34
4. Location of Well UNIT LETTER D 660 FEET FROM THE north LINE AND 660 FEET FROM THE west LINE, SECTION 29 TOWNSHIP 22S RANGE 37E N.M.P.M.		10. Field and Pool, or WHdeat Langlie Mattix S.R.G.G.B
15. Elevation (Show whether DF, RT, GR, etc.) GR - 3382'		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

9/15/86 RU, GIH with RBP & PKR & test for casing leaks
Repair as needed.
Reperforate same interval & stimulate with acid.
Put back on production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED James Brown TITLE Regulatory Supervisor DATE 9-10-86

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE SEP 12 1986

CONDITIONS OF APPROVAL, IF ANY: