Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office <u>District I</u>	Energy, Minerals and Natural Resources		Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240	NM 87240		WELL API NO. 30-025-25211
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III	2040 South Pacheco		STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505			
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			7. Lease Name or Unit Agreement Name:
PROPOSALS.)			BLINEBRY-DRINKARD
Type of Well:     Oil Well □ Gas Well □ Other SWD Well			
2. Name of Operator			8. Well No.
RICE OPERATING COMPANY			A-22
3. Address of Operator			9. Pool name or Wildcat SAN ANDRES
122 W. TAYLOR, HOBBS, NM 88240 SAN ANDRES  4. Well Location			
Unit LetterA:	817feet from theNORTI	H line and965	feet from the _EASTline
Section 22	Township 22S	Range 37E	NMPM LEA County
Section 22	10. Elevation (Show whether L		
3352' GL			
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	TENTION TO: PLUG AND ABANDON	SUB REMEDIAL WOR	SEQUENT REPORT OF: K ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	LLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE  COMPLETION	CASING TEST / 0	
OTHER:		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			
Rig up on well, circulate oil blanket OOH.  POOH w/ 5 ½" IPC tbg, Tag for fill.  GIH w/ workstring, make 2 bailor runs to extract fill (CaCO4, acid soluble)  Spot surfactant on openhole face; swab back.  Spot 1500 gal 15% HCl on openhole face; swab back.  Repair wellhead: install new flange, bell nipple, SS valve.  Run 2 7/8" IPC J55 tbg. Set packer @ 3785".  Notified OCD of MIT on 5-11-00, but no rep on site to witness. MIT at 380# for 30 min with no fall off. Chart attached.  Return to injection.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE and Common TITLE OPERATIONS ENGINEER DATE 5-1500			
Type or print name CAROLYN DORAN HAYNES Telephone No. 505-393-9174			
(This space for State use)			
ADDDDOVED BY	्रा)' पारा ह	and the second s	DATE
APPPROVED BYConditions of approval, if any:	THE	en e	



