State of New Mexico Energy, Minerals and Natural Resources Department

Ferm C-103 Revised 1-1-89

DISTRICT! OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	30-025-28511
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	
4 DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR, USE "APPLICATION FOR PEHMIT"	STATE "A" ASSESSMENT AIC-3 A
(FORM C-101) FOR SUCH PROPOSALS.)	STATE "A" ACCOUNT /TIC "D /T
1. Type of Well: OL ONS OTHER Water Injection Well	
	8. Well No.
2. Name of Operator	12
Clayton W. Williams, Jr., Inc.	9. Pool name or Wildcat
6 Desta Drive, Suite 3000, Midland, Texas 79705	Langlie Mattix -SR-Qu-GB
4 Well Location	
Unit Letter B : 25 Feet From The North Line and 2615 Feet From The East Line	
Section 10 Township 23S Range 36E	NMPM Lea County
Section 10 lowestup 235 Range 35 K	
GR = 3465.6	
Check Appropriate Box to Indicate Nature of Notice Report, or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
NOTICE OF INTENTION TO.	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON X CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
POLL ON ACTOR OF THE POLICY OF	
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.	
Estimated Start Date 9-29-92	
1) Load tubing/casing annulus with field saltwater (Packer @ 3605')	
2) Pressure test casing to 500 psi for 30 minutes. Record test on chart for	
OCD subsequent report.	
3) Temporarily abandon well for future use.	
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I hereby carrify that the information about is true and complete to the best of my knowledge and belief.	
$1 \cdot 1 \cdot$	Rngineer DATE 9-25-92
SIGNATURE Petroleum	VAIS
TYPEOR MENT NAME David Grafe	TELEPHONE NO.
(This space for State III) IRAL DIGNED BY JERRY SEXTON	SEP 29'92
900001 Our services	SEF AU JZ

APPROVED BY ----

RECEIVED SEP 2 8 1992

OCD HOBBS OFFICE