## State of New Mexico

Form C	103
Revised	1-1-89

Submit 3 Copies to Appropriate District Office		ural Resources Department	Form C·103 Revised 1·1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		TION DIVISION	WELL API NO.
DISTRICT II		ox 2088 exico 87504-2088	30-025-28512
P.O. Drawer DD, Artesia, NM 88210		7,50 ¥ 2000	5. Indicate Type of Lease STATE XX FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE XX FEE 6. State Oil & Gas Lease No.
SUNDRY NOT	CES AND REPORTS ON	WELLS	
(FORM C	PPOSALS TO DRILL OR TO DI RVOIR. USE "APPLICATION F 101) FOR SUCH PROPOSALS	OR PERMIT"	7. Lease Name or Unit Agreement Name
1. Type of Well: Oil. GAS WELL GAS WELL	опнежWat	er Inj. Well	State A A/C 1
2. Name of Operator  Clayton W. Williams, J.	r Tno		8. Well No.
3. Address of Operator	., Iuc.		9. Pool name or Wildcat
Six Desta Drive, Suite 4. Well Location	3000 Midland, Te	xas 79705	Langlie Mattix-7R-Q-GB
Unit Letter K : 134	5 Feet From The West	Line and139	5 Feet From The South Lin
Section 3	Township 23S	Range 36E	Too
	/////	hether DF, RKB, RT, GR, etc.)	NMPM Lea County
	GR -	<del></del>	
NOTICE OF INT	Appropriate Box to India ENTION TO:	cate Nature of Notice, R	eport, or Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK			SEQUENT REPORT OF:
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON  PULL OR ALTER CASING	CHANGE PLANS	COMMENCE DRILLING	OPNS.  PLUG AND ABANDONMENT
_		CASING TEST AND CE	
OTHER:		OTHER: Tempora	rily Abandon
<ol> <li>Describe Proposed or Completed Operation</li> <li>SEE RULE 1103.</li> </ol>	cons (Clearly state all pertinent del	ails, and give pertinent dates, includ	ling estimated date of starting any proposed
3-16-92			
1) Loaded 5 1/2" casin	g with field salt	water. (CIBP at 35	50')
<ol><li>Pressure tested cas (See attached chart</li></ol>	ing from surface to.)	o 3550' to 510 psi	for 30 minutes.
3) Temporarily abandon	ed well for future	use.	
I hereby certify that the information above is true	and complete to the best of my knowled	ge and belief.	
SIGNATURE NOW -	- Aray C	_ mm. Petroleum En	gineer
TYPEORPRINT NAME David G.	Grafe		TELEPHONE NO.682-6324
(This space for State Use) ORIGINAL SIGNED	DV strain		
APPROVED BY	20.40.00% 24.552.64.46.7.50M	— ТП.8	MAR 24
CONDITIONS OF APPROVAL, IF ANY:		This Approval Abandonment Ex	of lemporary
			The second secon

RECEIVED

MAR 23 1992

JOD HORRS OFFICE