

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-30999
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	State A AC 1
8. Well No.	123
9. Pool name or Wildcat	Jalmat Tansill Yates 7 Rvrs

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Clayton Williams Energy, Inc.	
3. Address of Operator Six Desta Drive, Suite 3000 Midland, Texas 79705	
4. Well Location Unit Letter N : 990 Feet From The South Line and 2250 Feet From The West Line Section 9 Township 23S Range 36E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3485 GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

- 1) Set CIBP at \pm 2900'.
- 2) Load Hole and test casing to 500 psi for 30 minutes.
- 3) Properly Ta well.

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

SIGNATURE Greg Benton TITLE Petroleum Engineer DATE 01/03/94
TYPE OR PRINT NAME Greg Benton TELEPHONE NO. 682-6324

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE JAN 05 1994
CONDITIONS OF APPROVAL, IF ANY: