State of New Mexico

Form C-103 Revised 1-1-89

Submit 3 Copies to Appropriate District Office ierals and Natural Resources Department Energy, OIL CONSERVATION DIVISION DISTRICT I

DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-33681	
P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease	ATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease N R-3480	
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR	AND REPORTS ON WEL ALS TO DRILL OR TO DEEPEN . USE "APPLICATION FOR PEI FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agr Cole State	eement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER			
2. Name of Operator			8. Well No.	
?ia Energy Inc.			7	
P.O. Box 2219, Hobbs, NM 88241			9. Pool name or Wildcat Eunice San Andres SW	
4. Well Location	40 66541		LOUICE SAU AUGI	.63 0**
Unit Letter H : 2300 F	eet From The North	Line and 9	Feet From The	East Line
Section 16	Township 22 South Ra	_{inge} 37 East	NMPM	Lea County
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	1///	
	3407	·····		
	ropriate Box to Indicate I		•	
NOTICE OF INTEN	HON TO:	SUE	SEQUENT REPOR	RT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERI	ING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. 🔯 PLUG A	AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER:		OTHER:		
12. Describe Proposed or Completed Operations (work) SEE RULE 1103.	Cicarly state all pertinent details, ar	d give pertinent dates, inclu	iding estimated date of starting	any proposed
 Moved in and rigged up Spudded and drilled 12½ Ran 400' of 8 5/8" - 24 Circulated 8 sxs to pit Waited on cement 12 hrs Drilling ahead 11/23/96 	a" hole to 412'. # casing. Set at 4 Drilled plug and	402° cemented us		
I hereby certify that the information above is true and co	omplete to the best of my knowledge and	l belief.	·	

I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE	rris Aelson	mue President	DATE1/30/97			
TYPE OR PRINT NAME	Farris Nelson	505/393-2937	TELEPTIONE NO.			
(This space for State Use)						
APPROVED BY		TITLE	DATE			