Submit 3 Copies to Appropriate District Offices

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

\_\_ DATE \_\_

DRUIGI OTIGES			arai resources Departin	ient	Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM & DISTRICT II		310 Old Santa Fe T	NSERVATION DIVISION Old Santa Fe Trail, Room 206		WELL API NO	
P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87503				30 025 08280		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				5. Indicate Type of Lease Federal STATE FEE		
				6. State Oil & Gas Le	ase No.	
	ENT RESERVOIR. (	ME APPLICATION FOR I	V-1.05 5	7. Lease Name or Un	it Agreement Name	
1. Type of Well:	(FORM C-101) FO	OR SUCH PROPOSALS.)		NORTH EL MAR		
OIL WELL	GAS WELL	other INJ	JECTION	HORTH EL MAR	UNIT	
2. Name of Operator	Valley, Inc			0.17/ 11.37		
3. Address of Operator	valley, Inc	•		8. Well No.		
P 0 Box 102	80, Midland,	TX 79702		9. Pool name or Wilde	at	
4. Well Location		77702		El Mar; Delaw	are	
Unit LetterB_	_:_660 Feet	From The north	Line and200	5 _		
Section 25			Line and	Feet From The	eastLine	
- Section 25	Tow	uship 26S	Range 32E	NMPM	LEA County	
		10. Elevation (Show wh	sether DF, RKB, RT, GR, etc.)		DEFT COURTY	
11.	Charle A-	3138']	DF			
NOTICE	Check Appropri	ate Box to Indicate I	Nature of Notice, Repo	rt, or Other Data		
NOTICE	OF INTENTIO	ON TO:		SEQUENT REP	ORT OF:	
ERFORM REMEDIAL WORK	PLU PLU	JG AND ABANDON	REMEDIAL WORK	<u> </u>	<b></b>	
EMPORARILY ABANDON	(III)		KEMEDIAL WORK	L ALTI	ERING CASING	
THIF OFWICH ABANDON	СН/	ANGE PLANS	COMMENCE DRILLING	OPNS. PILK	G AND ABANDON	
JLL OR ALTER CASING					NOVINADAMINOM	
THER:			CASING TEST AND CEM	ENT JOB		
			OTHER:			
<ol> <li>Describe Proposed or Comwork) SEE RULE 1103.</li> </ol>	pleted Operations	(Clearly state all pertiner	nt details, and give pertinent dat	as including the		
		_	, g p sa unicità mai	es, including estimated do	tte of starting any proposed	
well to be t	emporarily al	bandoned effecti	ve immediately pe	ndino field ro	ui or-	
			, , , , , , , , , , , , , , , , , , ,	warms frend te	view.	
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				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SEP 2000 = ]	
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	Apando	iment Expires	9/13/07	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Hobbs	
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				1050	7111376,25262	
				100	2978772585	
hereby certify that the information	above is true and comple	te to the best of my knowledge .	nd belief.			
	De Com		President		- 1	
	-11 0	TT1	TLE	DA	TE 9/10/2002	
YPE OR PRINT NAME St	ella Swanson		ner	FIFRUOIDA 015	/ 687-4220	
his space for State Use)	ORIGINIAL	CICVIED	1	ELEPHONE NO. 915	7 007-4.220	
-F Drave D36)	GARY W. 1	SIGNED BY			050 0 000	
PPROVED BY	OC FIELD I	REPRESENTATIVE II/ST	AEE MARKAPES		SEP 1 3 2002	
			TET MANAGER	DA	TE	



