Submit 3 Copies

State of New Mexico Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

__ DATE __

to Appropriate District Office	Energy, Minerals and Natural Resources Department			Kevised 1-1-09	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088			WELL API NO. 321-025-09526	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088			5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. D102436		
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.)				7. Lease Name or Unit Agreement Name	
. Type of Well:	TOTY FOR SOON FROM SOALS	·· <i>j</i>	7.	Coates Lese	
WELL A WELL	OTHER				
. Name of Operator Tenison Oil Company			8. Well No. 3		
Address of Operator One Glen Lakes, 8140 Walnut Hill Lane, Ste. 601, Dallas, TX			9. Pool name or Wildcat JALMAT		
l. Well Location			75231	<u>Fansill-Yates-7 Rivers</u>	
Unit Letter D : 660	Feet From The North		Line and660	Feet From The West Line	
Section 10	Township 24S			NMPM Lea County	
	10. Elevation (Show w	hether	DF, RKB, RT, GR, etc.)		
1. Check A	Appropriate Box to Indi	cate ì	Nature of Notice, Re	eport, or Other Data	
NOTICE OF INT	** *			SEQUENT REPORT OF:	
ERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS	CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
ULL OR ALTER CASING		CASING TEST AND CEMENT JOB			
THER: Est. start 2-27-93 OTHER:			<u></u>		
 Describe Proposed or Completed Operat work) SEE RULE 1103. 	ions (Clearly state all pertinent de	tails, ar	nd give pertinent dates, includ	ding estimated date of starting any proposed	
	bridge plug at 344 -1/2" casing in sel forations between 3 lace on production.	3122'	ed intervals fro and 3420'. Te	om 3122' to 3420'. est and if necessary frac.	
I hereby certify that the information above is true	and complete to the best of my knowle	edge and			
SIGNATURE	/ fact	— п	Operations M		
TYPEOR PRINT NAME Bruce C. 1	Macke			TELEPHONE NO. 214-363-50	
	NED STILL LIRRY SEXTON			'JAN 2 6 1993	

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APPROVED BY ---