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 1 P.O. Box 1980, Hobbs, NM 88240

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

OIL CONSERVATION	DIVISION
P.O. Box 2088	

Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-23170		
5. Indicate Type of Lease		x x

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	JG BACK TO A 7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL GAS WELL XX WELL OTHER	Flat C Sharp		
2. Name of Operator	8. Well No.		
Kelton Operating Corporation	1 ·		
3. Address of Operator	9. Pool name or Wildcat		
P.O. Box 276, Andrews, Texas 79714-0276	Cline Blinebry		
4 Well Location			
Unit Letter <u>H</u> : 1980 Feet From The North	Line and 660' Feet From The East Line		
Section 11 Township 23S Range	37E NMPM Lea County		
Section 11 Township 2.55 Range 10. Elevation (Show whether DF, Rk 3262 GL	B, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Natur	e of Notice, Report, or Other Data		
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:		
	MEDIAL WORK ALTERING CASING		
	MMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
	SING TEST AND CEMENT JOB		
OTHER:	HER: Plug back to Blinebry		
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give work) SEE RULE 1103. RECOMPLETE TO BLINEBRY FORMATION			
	5363-71, C) 5366-94, D) 5466 22, D) 5 1		
5-31-93 Frac down 2 7/8" tbg w/ 36,000 gallons 50/50 CO2 and 70,000# 20740 sand. 51 101			
6-1-93 Flowing well to clean up. Turned well down line. 6-3-93 24 Hour flow test concluded at 9:30 AM. Tested 75 barrels of 48gravity oil, 3 barrels water, and 1.12 MMCF gas at a flowing tubing pressure of 790# on			

I hereby certify that the information above is true and complete to the best of my knowledge an	d belia.
	me President pare 6-6-93
TYPEORPRINT NAME C. Dale Kelton	TELEPHONE NO915-523-653

(This space for State Use)

APPROVED BY-

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

a 20/48" choke.

CONDITIONS OF APPROVAL, IF ANY: