

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. 30-025-31116
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name C. T. Bates
8. Well No. 2
9. Pool name or Wildcat Rhodes (Y-7R) Gas
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2978.7 GR

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 Doyle Hartman
3. Address of Operator P. O. Box 10426, Midland, Texas 79702	4. Well Location Unit Letter L : 1980 Feet From The South Line and 760 Feet From The West Line Section 10 Township 16-S 26 Range 37-E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2978.7 GR	

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 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 checked="" 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.

Attached is a report of the uncontrollable waterflow we encountered during drilling operations and the plugging procedure we followed.

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

SIGNATURE Patrick K. Worrell TITLE Engineer DATE 6-20-91
TYPE OR PRINT NAME Patrick K. Worrell TELEPHONE NO. _____

(This space for State Use)

APPROVED BY Lyle F. Turnacliff TITLE OIL & GAS INSPECTOR DATE SEP 03 1991
CONDITIONS OF APPROVAL, IF ANY:

11/04/99
PAID
C1
E

RECEIVED

JUN 21 1991

OFF

HOBBES OFFICE