Submit 3 Copies o Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-100 Revised 1-1-89

SIGNOLOT I	•	
P.O. Box 1980.	Hobbs, NM	887.4

CONCEDUATION DIVISION

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	WELL API NO. 30-025-34687		
DISTRICT II Santa Fe, New Mexico 8 P.O. Drawer DD, Artesia, N.d. 88210	7504-2088 5. Indicate Type of Lease STATE X FEE		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No. LG 6337		
SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O DIFFERENT RESERVOIR. USE "APPLICATION FOR PERM (FORM C-101) FOR SUCH PROPOSALS.)	H PLOG BACK TO A 7. Lease Name or Unit Agreement Name		
1. Type of Well: Oa. WELL WELL X OTHER	Jackson Unit		
2. Name of Operator MURCHISON OIL & GAS, INC.	8. Well No. 7		
3. Address of Operator 1445 ROSS AVE., LB 152, DALLAS, TX. 75202-2	9. Pool name or Wildcat Johnson Ranch Wolfcamp		
4. Well Location Unit Letter J : 1980 Feet From The SOUTH Section 15 Township 24S Ran 10. Elevation (Show whether D	Line and 1980 Feet From The EAST Line Re 33E NMPM LEA County		
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB X		
OTHER:	OTHER:		
12 Describe Proposed or Completed Operations (Clearly state all perinent details, and work) SEE RULE 1103. Drilled 8-1/2" hole to 12602'. Ran 307 join N-80, (10 joints) L-80, (89 joints) P110 29 with 645 SXS Premium + 3% Econlite + 5 #/SX 370 SXS Premium 50/50 POZ + 2% Halad 322 + WOC 24 Hrs. Top of Cement @ 5260' by temp up 10,000 PSI manifold. Return to drilling	nts of (125 joints) S-95, (83 joints) #/FT LT&C Casing to 12602'. Cemented Salt + .25 #/SX Flocele followed by .2% HR-5. Bump Plug. Floats held OK. survey. Test BOP to 10,000 PSI. Rig		

I hereby certify that the faloringtion above is true and complete to the best of my knowledge SIGNATURE	. TITLE VICE PRESIDENT OPERATIONS DATE 11/15/99 (214)
TYPE OR PRINT NAME MICHAEL S. DAUGHERTY	(214) TELEPHONE NO. 953-1414

(This space for State Use) PRICINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR APPROVED BY-

TITLE .

CONDITIONS OF APPROVAL, IF ANY: