Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

CONDITIONS OF AFPROVAL, IF ANY:

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	310 Old Santa re Irail, Room 200		WELL API NO. 30-025-112530051	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87503			5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE x FEE	
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:			7. Lease Name or Unit Agreement Name Langlie Mattix Woolworth Unit	
OIL GAS WELL OTHER WIW				
2 Name of Operator Betwell Oil & Gas	Company		8. Well No. 703	
3. Address of Operator			9. Pool name or Wildcat	
P.O. Box 2577 Hialeah, FL 33012			Langlie Mattix	
4. Well Location	0 - South	1.0	0.0	7
Unit Letter : : :	O Feet From The South	Line and	Feet From The	East Line
Section 27			NMPM Lea	County
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)		
11. Check	Appropriate Box to Indicate	Nature of Notice P	enort or Other Data	
NOTICE OF INT			SEQUENT REPORT	OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING (_
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				ABANDONMENT
		CASING TEST AND CE	MENT JOB	
OTHER:		OTHER: perform	casing integrit	y test 🛣
12. Describe Proposed or Completed Open work) SEE RULE 1103.	ntions (Clearly state all pertinent details, o	and give pertinent dates, incl	luding estimated date of starting any	proposed
4-29-94 perform well shu	casing integrity te	st, request a	approval to leav	е
I hereby certify that the information above is trule	and complete to the heat of my imparied as and he	lief		
This	,			
SIONATURE	т	LE Operations	Manager DATE	4-15-94
TYPE OR PRINT NAME			TELEPHONE NO.	
(This space for State Use)			HIGH HESS CON	APR 20 (00)
APPROVED BY	m		DATE -	

AFR 19 1994 OFFICE