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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
647

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input checked="" type="checkbox"/> Convert to Injection	7. Unit Agreement Name
2. Name of Operator	Artesia Unit
DEPCO, Inc. ✓	8. Farm or Lease Name
3. Address of Operator	
800 Central, Odessa, Texas	9. Well No.
4. Location of Well	16
UNIT LETTER E, 1980 FEET FROM THE North LINE AND 660 FEET FROM	10. Field and Pool, or Wildcat
THE West LINE, SECTION 36 TOWNSHIP 17s RANGE 28e NMPM.	Artesia
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3674 GR	Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

OTHER ☐

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

Convert to Injection ☒

17. 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.

As permitted by NMOCC Case No. 3653 Order No. R-3311. A bridge plug was set at 2550', and plastic coated tubing with packer was set at 2406'. Commenced water injection on February 26, 1968. *fs 2455-63 + 2492-99*

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

SIGNED *R.D. Yeates* R.D. Yeates, P.E. TITLE District Engineer

DATE March 19, 1968

APPROVED BY

W.A. Gressett

TITLE

OIL AND GAS INSPECTOR

DATE

APR 1 1968

CONDITIONS OF APPROVAL, IF ANY: