NO. OF COPIES RECEIVED	14					Form C-103	
DISTRIBUTION						Supersedes Old C-102 and C-103	
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION			AISSION	Effective 1-1-65		
FILE	7-	1				****	
U.S.G.S.	/	†				5a. Indicate Type of Lea	ise
LAND OFFICE		1				State X	Fee.
	 , 	-				5. State Oil & Gas Leas	
OPERATOR	<i>/</i>]				1	e 140.
Of DEng.	<u> </u>		•			, в 1266,	
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 _" (DO NOT C-101) FOR SUCH PROPOSALS.)							
OIL X GAS				· · · · · · · · · · · · · · · · · · ·		7. Unit Agreement Name	
WELL WELL OTHER.						18. Farm or Lease Name	
Tenneco Oil Company						I am or Econo Hame	
	G-I West Coop. Unit						
3. Address of Operator						9. Well No.	
Box 1031, Midlar	id, Tex	cas 79701				36	
4. Location of Well						10. Field and Pool, or W	/ildcat
UNIT LETTER F	1	.980 FEET FROM THE	north	LINE AND	1980 <u>FEET FROM</u>	- Frinke	Kron.
THE West	INE. SECTI	ON TOWNSHIP	17 - S	BANCE	29-E		
···	02611	TOWNSHIP		RANGE	NMPM.		
	77777	15. Elevation (Sho	w whether D	F, RT, GR, etc.)		12. County	<i>////////</i>
						Eddy	
16.	777777		1		D		
NOTIC		Appropriate Box To Ind	iicate Na	iture of Notice	•	ner Data FREPORT OF:	
	JE 0				30032402141	KEI OKI OI.	
	ר				[⊽]		
PERFORM REMEDIAL WORK	4	PLUG AND ABA	MDON [REMEDIAL WORK		ALTERING CAS	ING
TEMPORARILY ABANDON	_			COMMENCE DRILLI	NG OPNS.	PLUG AND ABAI	NDONMENT
PULL OR ALTER CASING	_	CHANGE PLANS	الـا	CASING TEST AND		· ~ (
				OTHER MY	+ Treat add	iliana Pay	
OTHER				/		/	
				<u></u>			
 Describe Proposed or Co work) SEE RULE 1103. 	mpleted O	perations (Clearly state all pe	tinent detai	ls, and give pertir	ent dates, including	estimated date of starting	any proposed
PROCEDURE:							
		dia Marrida 66	774				•
		bing. Moved off p					
		9' - 2513' w/20 3/8					
		ridge plug 🏔d wire					
3. Frac down cs	sg. w/5	500 gals acid and 5	i0,000 g	gals. gelled	d water and 7	75,000# 20 - 40 sa	nd and
7 perforation	n seal	lers. Overflushed	w/lO BW	Ι.			
4. Shut-in over	night	5.					
		, ran tbg. w/retrie	vable h	ead & reco	vered bridge	nlug.	
_		and put on pump.				F = - O -	
		and put on pump.	4.				
1 hale It th	a fellow	injenterals 2269,	74,76,	2305, 21,2	23, 32, 36, 39,	, 57, 62,71,7	3,84,90
,							
2404,06,0	98 , 25	07 + 25 13.					
18. I hereby certify that the	information	n above is true and complete to	the best of	my knowledge and	d belief.		
18. I hereby certify that the	information	above is true and complete to	the best of	my knowledge and	d belief.		
18. I hereby certify that the	Information					er 7-6-67	
18. I hereby certify that the	information	J. F. Carnes				er _{DATE} 7-6-67	
18. I hereby certify that the	information					er _{date} 7-6-67	
18. I hereby certify that the	information		ne Dist	rict Produc	ction Enginee	er date 7-6-67	
SIGNED SIGNED APPROVED BY W.C.	anformation		ne Dist		ction Enginee	er _{date} 7-6-67	