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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. E-7345-1

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Dry	7. Unit Agreement Name
2. Name of Operator Tenneco Oil Company	8. Farm or Lease Name Machris State
3. Address of Operator Box 1031 Midland, Texas	9. Well No. 2
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE east LINE, SECTION 32 TOWNSHIP 19-S RANGE 31-E NMPM.	10. Field and Pool, or Wildcat Wildcat (J. H. H.)
15. Elevation (Show whether DF, RT, GR, etc.) 3493 DF	12. County Eddy

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER PA <input checked="" type="checkbox"/>

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.

Final Plugging Report:

35 sx cmt plug set 1040 - 1155 Stub of 8 5/8"

50 sx cmt plug set 545 - 645

15 sx cmt plug set cellar base - 30

Dry Hole Marker Installed

3370' 8 5/8" csg and 591' 13 3/8" csg left in hole

RECEIVED

APR 29 1966

O. C. C.
ARTERIA, OFFICE

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

SIGNED J. F. Carnes J. F. Carnes TITLE District Prod. Foreman DATE April 26, 1966

APPROVED BY W. A. Grasset TITLE W. A. Grasset DATE APR 29 1966

CONDITIONS OF APPROVAL, IF ANY: