	1 17			
NO. OF COPIES RECEIVED	1.2	т		Form C-103
DISTRIBUTION				Supersedes Old C-102 and C-103
SANTA FE	/		NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	17	V		
U.S.G.S.	- 			5a. Indicate Type of Lease
		+		State Fee
LAND OFFICE	+,			5. State Oil & Gas Lease No.
OPERATOR		L		
				K-1883
(DO NCT USE THIS F US	SU FORM FO	NDF	NOTICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. N FOR PERMIT - " (FORM C - 101) FOR SUCH PROPOSALS.)	
OIL GA:	s	}	OTHER- INVECTION	7. Unit Agreement Name
2. Name of Operator			OTHER LAVEC / 18K	8. Form or Lease Name
1	. 2 .~	<	- -	
DUR WINK	<u>LE</u>	~	SANCON	ONWECL 9. Well No.
20 VASSA	977	.S.	E., ALBUQ., N.M.	# 8
4. Location of Well	-			10. Field and Pool, or Wildcat
UNIT LETTER	·		30 FEET FROM THE NONTIS LINE AND 1980 FEET FROM	CHACO WAST-MESO VERD
THE WEST	LINE,	SECTI	28 TOWNSHIP 20 RANGE 9 NMPM.	
		•	,	<u> </u>
			15. Elevation (Show whether DF, RT, GR, etc.)	12. County McKirky
16.	7777		To I I I I I I I I I I I I I I I I I I I	
NOT			ppropriate Box To Indicate Nature of Notice, Report or Ot FENTION TO: SUBSEQUENT	her Data T REPORT OF:
PERFORM REMEDIAL WORK	¬ `		PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
ī	╡			
TEMPORARILY ABANDON	=={		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING			CHANGE PLANS CASING TEST AND CEMENT JOB	
			OTHER	
OTHER STITLE ILL	176	<u> </u>	NTO INS. WELL	
work) SEE RULE 1103	omplet.	ed O	rations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposed
4			1 0 m 1 A	10
STAR TEL	2 C	じゅ	TER INTO WELL NO 8 ON APRIL	15,1468,
INVIRATE WAS 150 BBCS/DBY @ 500 PSI				
THUTTE WAS 130 ENCS/ NOT G TO PT				
				CALLY POUR
				CV 3 0M
				16 77 00
				1 76, 4, 3
				/ # O'S'
				/ ON DI-
				
	.A			
18. I hereby centry that the	dform	nation	bove is true and complete to the best of my knowledge and belief.	
LO K	7	.9	<i>C</i> > .	1 1 2
SIGNED NO.	Au	le	e TITLE Clégewill	DATE STICLES
4000000 TH 8000	,,		Charles THE Sup Dest III	5-13-68
CONDITIONS OF TEST	~		way the) DATE
CONDITIONS OF APPROV	AL, 15	ANY	,	