لُ ، UPICS ALCEITED الْ					Form C+103	_	
DISTRIBUTION					Supersedes Old C-102 and C-10		
SANTAFE	NEW WE	XICO OIL CONSE	ERVATION COMMISSION	,	Effective 1-1-65	ذ	
FILE '	4		J. T. W + 2 1/1		5a. Indicate Type o	of I earne	
U.S.G.S.	-				State	Fee	X
OPERATOR /	4				5. State Oil & Gas		
OPERATOR			11		1		
SUNDS	RY NOTICES AND	REPORTS ON	WELLS LCK TO A DIFFERENT RESERV	O1R.			III
OIL GAS WELL	OTHER. Dry	hole_			7. Unit Agreement		
2. Name of Operator	-				8. Farm or Lease 1 Reserve-La		
Reserve 0il,	inc.				9. Well No.		
•	68, Denver, Co	lorado 8021	7 .		1		
4. Location of Well	oo, beliver, do	101440 0021	,		10. Field and Pool	, or Wildcat	
UNIT LETTER F	1750 FEET FROM	THE Nort	h LINE AND	FEET FROM	Wildcat - E	ntrada	~~~
THEWest_ LINE, SECT	10N 9	WNSHIP 18N	RANGE 7W	NMPM.			
	/////	ion (Show whether b	DF, RT, GR, etc.)		12. County McKinley		111
16. Check	111111		ature of Notice, Rep	oort or Oth		*7777777	7777
	INTENTION TO:	To indicate N	·		REPORT OF:		
PERFORM REMEDIAL WORK	PLUG	AND ABANDON	REMEDIAL WORK		ALTERIN	IG CASING	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS	. Ħ	PLUG AN	D ABANDONMEN	ı
PULL OR ALTER CASING	CHANG	E PLANS	CASING TEST AND CEMENT	108			
			OTHER			-	_ L
OTHER							
17. Describe Proposed or Completed C	Operations (Clearly stat	e all pertinent deta	ils, and give pertinent dat	es, including	estimated date of st	arting any pro	posed
work) SEE RULE 1103.							
Request approdrill pipe,	oval to plug a 214 sx of clas	nd abandon s "G" cemen	the subject well t at the follow	l by spot ing inter	ting down o	pened	
10501 10501	21						
4850'-4950'	34 sx.						
3700'-3800' 3400'-3500'	34 sx. 34 sx.						
2750'-2900'	51 sx.						
1500-1600'	34 sx.						
216-266'	17 sx.						
10 sx. to su							
		he spaced w	/9#/gal chemical	l cel mud	l. Subseque	nt to	
Each Cemente	of curface th	o appropria	te District Off:	ice of th	e Commissio		
				ice or ci			٠,
be contacted	for a surface	. Inspection	•				. 3
					/0v	- 3	
					K Kin	20 7 W. W.	7
						v 3 13	i
					1 M.F.	14 201 50	<u> </u>
*					OIL	CONT	
18. I hereby certify that the information	on above is true and con	nplete to the best o	f my knowledge and belief	•			
	4						
SIGNED A CJack C. Bont	Mer	Div	. Oper. Superin	tendent	DATE 4-2	5-77	
SIN L	<i></i>	QITDE	EVISOD DIOM		MAY	3 19	$7\overline{7}$
APPROVED BY WILL APPROVED BY	dich	TITLE	RVISOR DIST. #3		DATE		
CONDITIONS OF APPROVAL, IF AN	IY!						