NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State X Fee.
OPERATOR		5, State Oil & Gas Lease No.
		LG-8020
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.)		
I. OIL X GAS WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator		8, Farm or Lease Name
REESE AND JONES	•	Johnson State
3. Address of Operator		9. Well No.
Suite 402, 20 First Plaza, Albuquerque, NM 87102		1
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTERA	766 FEET FROM THE NORTH LINE AND 643 FEE	Wildcat
THE East LINE, SECTIO	N 16 TOWNSHIP 11N RANGE 20W	NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	6989 Gr.	McKinley
Check A	Appropriate Box To Indicate Nature of Notice, Report of	or Other Date
NOTICE OF IN		UENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	7
TEMPORARILY ABANDON		ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS X CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
-	OTHER	- · · · · · · · · · · · · · · · · · · ·
OTHER		
work) SEE RULE 1103.	erations (Clearly state all pertinent details, and give pertinent dates, inc	luding estimated date of starting any proposed
Propose to change casin	g program:	
,	5.1 - 5.2	
Plan to spud 13 3/8 ho	le and drill to 105' and set 100' of 10 3/4	M casing with
sufficient cement to ci	rculate to surface. Drill 9 7/84 hole to 9	501 and set
/ 5/8" casing with 100	sxs of cement. Drill 6 3/4* hole to a tot.	al depth of
3000 or depth sufficen	t to test the Permian formation.	
		AWER
	/C71	
		366
	ADI	R 14 1981
	/ Ar	COM.
	OIL	CON. COM.
		DIST. 3
	_	
•		
18. I hereby certify that the information a	bove true and complete to the best of my knowledge and belief.	
1/11 . 1	5\ /	
SIGNED TO THE	Morris B. Jones, Engine	
-1/		
Original Signed by FR	AND T CHAIR	APR 141981
APPROVED BY OFFICE DY FK	ANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3	DATE HINT
CONDITIONS OF ADDROVAL OF ANY.		