

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANITARY	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form O-103
Revised 10-1-75

10. Indicate Type of Lease	
State ☐	Fee ☒
11. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPCEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT TO DRILL" (FORM O-101) FOR SUCH PROPOSALS.

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-		7. Unit Agreement Name
2. Name of Operator Black Oil, Inc.		8. Firm or Lease Name NMACO-GURLEY
3. Address of Operator P.O. Box 537, Farmington, NM 87499		9. Well No. 4
4. Location of well UNIT LETTER <u>0</u> <u>330</u> FEET FROM THE <u>South</u> LINE AND <u>1750</u> FEET FROM THE <u>East</u> LINE, SECTION <u>9</u> TOWNSHIP <u>20N</u> RANGE <u>12W</u> N.M.P.M.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 6129 GR		12. County McKinley

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐ OTHER ☐	REMEDIAL WORK ☐ COMMENCE DRILLING OPNS. ☐ CASING TEST AND CEMENT JOBS ☐ OTHER <u>Set pumping unit</u> ☒
PLUG AND ABANDON ☐ CHANGE PLANS ☐	ALTERING CASING ☐ PLUG AND ABANDONMENT ☐

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.

We set a Jensen 25A pumping unit on the above well on 11/19/87 and started pumping to tanks on 11/20/87.

RECEIVED
NOV 24 1987
OIL CON. DIV.
DIST. 3

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

SIGNED <u>Frank T. Chavez</u>	TITLE <u>President</u>	DATE <u>11/30/87</u>
APPROVED BY <u>Original Signed by FRANK T. CHAVEZ</u>	TITLE <u>SUPERVISOR DISTRICT 3</u>	DATE <u>DEC 14 1987</u>

CONDITIONS OF APPROVAL, IF ANY: