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LAND OFFICE	
OPERATOR	1

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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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- Use as Water Well		7. Unit Agreement Name
2. Name of Operator C.S.T. ENTERPRISES, INC..		8. Farm or Lease Name Florencia Montoya
3. Address of Operator Box 1307, Bloomfield, New Mexico		9. Well No. Rita #1
4. Location of Well UNIT LETTER J 1650' FEET FROM THE East LINE AND 2310' FEET FROM THE South LINE, SECTION 4 TOWNSHIP 22N RANGE 3E NMPM.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 6719' GR		12. County Rio Arriba

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/> Use as a water well	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input 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.

Plan to turn over to land owner for use as water well



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

SIGNED John R. Toler TITLE **Secretary-Treasurer** DATE **9-15-76**

Original Signed by **A. R. Kendrick**

SUPERVISOR DIST. #0

APPROVED BY _____ DATE **SEP 22 1976**

CONDITIONS OF APPROVAL, IF ANY: