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NEW MEXICO OIL CONSERVATION COMMISSION

3-MMOCC Aztec
1-File

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Tidewater Oil Company	8. Farm or Lease Name Santa Fe "D"
3. Address of Operator Box 249, Hobbs, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER C , 660 FEET FROM THE North LINE AND 1236 FEET FROM THE West LINE, SECTION 7 TOWNSHIP 21 N RANGE 13 W NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 5936 GR	12. County San Juan

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

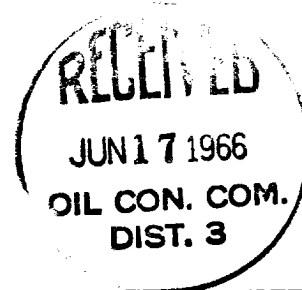
NOTICE OF INTENTION TO:

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 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"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

Spudded 11:00 PM, 5-9-66. Drilled 9-7/8" hole to 120'. Set 7-5/8" 24# H-40 casing at 115'. Cemented with 50 sacks reg. with 2% CaCl₂. Cement circulated. WOC 10 hours. Tested 7-5/8" with 500# for 30 minutes, no drop in pressure.



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

Original Signed By

SIGNED O. L. WADE TITLE Area Supt. DATE 6-16-66

APPROVED BY *Emery* TITLE *Supt Dist 14* DATE 6-17-66
CONDITIONS OF APPROVAL, IF ANY: