

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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NEW MEXICO OIL CONSERVATION COMMISSION

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name	
2. Name of Operator Jerome P. McHugh		8. Farm or Lease Name New Namer	
3. Address of Operator Box 208, Farmington, NM 87401		9. Well No. #1	
4. Location of Well UNIT LETTER <u>0***</u> <u>790'</u> FEET FROM THE <u>South</u> LINE AND <u>1850'</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>24N</u> RANGE <u>2W</u> NMPM.		10. Field and Pool, or Wildcat Gavilan P.C.	
15. Elevation (Show whether DF, RT, GR, etc.) 7315' G.L.		12. County Rio Arriba	

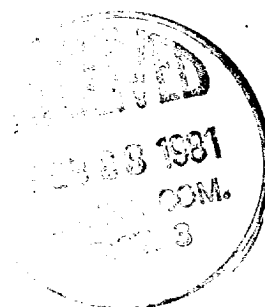
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input 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 type="checkbox"/>	OTHER <input type="checkbox"/>
Request for extension of APD <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.

***Note Corrected Unit Letter for Item #4.

Request extension of APD due to unavailability of rig.

FOR INFORMATION
DRILLING
9-7-81



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

SIGNED <u>Jim L. Jacobs</u>	TITLE <u>Agent</u>	DATE <u>2-20-81</u>
Original Signed by FRANK T. CHAVEZ		
APPROVED BY _____	TITLE <u>SUPERVISOR DISTRICT # 3</u>	DATE <u>FEB 23 1981</u>
CONDITIONS OF APPROVAL, IF ANY:		