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NEW MEXICO OIL CONSERVATION COMMISSION

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

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|--|
| 5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No. #-9895 |
| 7. Unit Agreement Name |
| 8. Farm or Lease Name STATE "J" COM. |
| 9. Well No. 1 |
| 10. Field and Pool, or Wildcat BASIN DAKOTA |
| 12. County SAN JUAN |

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 ☒ GAS WELL ☐ OTHER-

2. Name of Operator
MONSANTO COMPANY

3. Address of Operator
1330 Midland National Bank Tower, Midland, Tx. 79701

4. Location of Well
UNIT LETTER D 790 FEET FROM THE North LINE AND 790 FEET FROM
THE West LINE, SECTION 16 TOWNSHIP 26N RANGE 11W NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
GR 6260

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 CASINGS <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 JOBS <input type="checkbox"/> | OTHER <u>Swab well</u> <input checked="" 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.

- (1) MI & RU Swab unit: FL 1000' FS; Swab on well 6 Hrs; end of swab FL 2500' FS; SION.
- (2) WIH w/ swab; FL 1000' FS; Mwab on well 8 hrs, end of swab FL 2500-2800' FS; SI
- (3) WIH w/ swab; FL 1000' FS; Mwab well; could not swab down; Rig down & SI.



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

SIGNED [Signature] TITLE Regional Prod. Mgr. DATE 2/13/80

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE FEB 19 1980

CONDITIONS OF APPROVAL, IF ANY: