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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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Antec Oil & Gas Company	8. Farm or Lease Name Sategna
3. Address of Operator Drawer 570, Farmington, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER M , 4290 FEET FROM THE N LINE AND 4720 FEET FROM THE E LINE, SECTION 21 TOWNSHIP 29N RANGE 11W NMPM.	10. Field and Pool, or Wildcat Fulcher Kutz
15. Elevation (Show whether DF, RT, GR, etc.) 5415 GL	12. County San Juan

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
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.

Propose to:

Pull 1" tubing and clean out open hole to T.D. of 1703.
Run logs, run 3 1/2" casing to T.D. and cement to surface squeezing possible holes in 5 1/2" casing.
Perforate and frac Pictured Cliffs zone.
Rerun tubing (1") and put well back on production.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
ORIGINAL SIGNED BY JOE C. SALMON

SIGNED Joe C. Salmon TITLE District Superintendent DATE 9-17-65

APPROVED BY Emory Clark TITLE Supervisor Dist. # 3 DATE SEP 21 1965

CONDITIONS OF APPROVAL, IF ANY: