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OPERATOR		

3-NMOCD

## NEW MEXICO OIL CONSERVATION COMMISSION

1 - Pioneer

Supersedes Old  
C-103 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.	
7. Unit Agreement Name	
8. Farm or Lease Name Shepherd & Kelsey	
9. Well No. #1E	
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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-
2. Name of Operator Pioneer Production Corp.
3. Address of Operator P O Box 208, Farmington, NM 87401
4. Location of Well UNIT LETTER <u>D</u> <u>790</u> FEET FROM THE <u>North</u> LINE AND <u>1100</u> FEET FROM THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>29N</u> RANGE <u>11W</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 5465'

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	
PERFORM REMEDIAL WORK <input 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 checked="" type="checkbox"/> Request for extension of APD
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.

Request extension of APD due to unavailability of rig.

FOR DRILLING

EXPIRES

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 8-3-81

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

SIGNED Thomas A. Dugan TITLE Agent DATE 1-27-81  
APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE JAN 29 1981  
CONDITIONS OF APPROVAL, IF ANY: