NO. OF COPIES RECEIVED	7.6			1
	17,			Form C-103
DISTRIBUTION SANTA FE			Supersedes Old	
FILE	+-{	NEW MEXICO OIL CONSE	RVATION COMMISSION	C-102 and C-103 Effective 1-1-65
	+-'+-1	_		
U.S.G.S.				5a. Indicate Type of Lease
LAND OFFICE	+ _ + _			State Fee V
OPERATOR	12]	•		5. State Oil & Gas Lease No.
	C			
(DO NOT USE THIS F	SUNDRY	NOTICES AND REPORTS ON V	YELLS	
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. 1.				
OIL GAS	. [XX			7. Unit Agreement Name
2. Name of Operator		OTHER-		
Aztec Oil & Gas Company				8, Farm or Lease Name
3. Address of Operator				Hillstrom
P. O. Box 570, Farmington, New Mexico				9. Well No.
4. Location of Well				#1-A
F 1650 Nonth 1150				10. Field and Pool, or Wildcat
UNIT LETTER E 1650 FEET FROM THE NORTH LINE AND 1150 FEET FROM				Blanco Mesa Verde
THE WEST	INE, SECTION	35 TOWNSHIP 32	N RANGE 12W	vмрм. ()
mmmm	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15. Elevation (Show whether Di		
			•	12. County
	7777777	6321		San Juan
	Check A	opropriate Box To Indicate Na	ture of Notice, Report of	r Other Data
NOTIC	CE OF IN	ENTION TO:	SUBSEQL	JENT REPORT OF:
_	7			
PERFORM REMEDIAL WORK	-	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON] 1		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	J	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		<u></u>	OTHER	Spud & surface csg.
OTHER		——————————————————————————————————————		<u> </u>
17. Describe Proposed or Co	mpleted Oper	gtions (Clearly state all posting 1)		uding estimated date of starting any propose
work) SEE RULE 1103.		(creatly state att pertitent aetail)	i, and give pertinent dates, incli	uding estimated date of starting any propose
5-12-77 Sp	oudded 1	2-1/4" surface hole at 3	:00 PM.	
5-14-77 Ra	ın 5 joi	nts of 9-5/8", 36# casing	g. Total 200', set	at 211'.
Ce	emented	with 190 sacks Class "B"	with 1/4# gel-flake	e ner sack
an	ıd 3% Ca	Cl. Plug down at 12:45 I	M. Cement circulat	ted to surface
		-		cod to surrace.
			المناه المتعاد المحافظين	
			r V	
I hamabu aastifa da ada a				
. I hereby certify that the in	iormation ab	ove is true and complete to the best of m	y knowledge and belief.	
	1/	1/_		
GNED	1000	TITLE Distr	ict Production Mana	Ger him More 16 1088
		9	reconstruit Platfa	ger DATE May 16, 1977
rigina				
PROVED BY		TITLE SHEARY	TROR 0790. #3	
ONDITIONS OF APPROVAL	IF ANY:			DATE