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# NEW MEXICO OIL CONSERVATION COMMISSION

Form O-161  
Superseded 10-22  
G-142 and G-143  
Effective 1-1-65

|                                                                                                                                                                                                                                       |  |                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><small>(DO NOT USE THIS FORM FOR A REQUEST TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (FORM G-101) FOR SUCH PROPOSALS.)</small> |  | 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <i>Drilling</i>                                                                             |  | 5. State Oil & Gas Lease No.<br><i>5-0-39</i>                                                        |
| 2. Name of Operator<br><i>New Mexican Petroleum Corp.</i>                                                                                                                                                                             |  | 7. Unit Agreement Name                                                                               |
| 3. Address of Operator<br><i>Box 12, Hobbs, New Mexico 88240</i>                                                                                                                                                                      |  | 8. Farm or Lease Name<br><i>State DK</i>                                                             |
| 4. Location of Well<br>UNIT LETTER <i>C</i> <i>160</i> FEET FROM THE <i>North</i> LINE AND <i>1980</i> FEET FROM THE <i>West</i> LINE, SECTION <i>17</i> TOWNSHIP <i>11-N</i> RANGE <i>33-E</i> NMPM.                                 |  | 9. Well No.<br><i>2</i>                                                                              |
| 15. Elevation (Show whether DF, RT, CR, etc.)                                                                                                                                                                                         |  | 10. Field and Pool, or Wilcox<br><i>McALEER Lower Perm. No.</i>                                      |
| 12. County<br><i>Lea</i>                                                                                                                                                                                                              |  |                                                                                                      |

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 checked="" 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 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.

*Cactus Drilling Corp. spudded 17 1/2" hole 11:00 P.M. 1-14-63.  
13 7/8" CD 4 3/4" H-40 casing set at 403' w/ 350 wt. inc. plus 2 1/2" CACL. Circ. 25 wt. After WOC 18 hours, tested casing w/ 1000 psi for 30 minutes. Test O.K.*

*Reduced hole to 11" at 403' and resumed drilling.*

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

SIGNED *[Signature]* TITLE *General Mgr.* DATE *1-17-63*

APPROVED BY *[Signature]* TITLE *Commissioner* DATE *1-17-63*

CONDITIONS OF APPROVAL, IF ANY:

*2-11-63-11  
1-1-63  
1-2-63*