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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  Fee

5. State Oil & Gas Lease No.  
**K-3218**

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>H. C. HOOD</b>	8. Form or Lease Name <del>AROP STATE</del>
3. Address of Operator <b>c/o Geo. Kingrea, Box 291, Midland, Texas 79701</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>B</b> <b>990</b> FEET FROM THE <b>North</b> LINE AND <b>1650</b> FEET FROM THE <b>East</b> LINE, SECTION <b>12</b> TOWNSHIP <b>9-S</b> RANGE <b>32-E</b> NMPM.	10. Field and Pool, or Wildcat <b>UNDESIGNATED</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4406' GR</b>	12. County <b>LEA</b>

16. 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 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"/>	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.

**February 17, 1968**

Ran 98 Jts. of 8 5/8" casing (32 & 24# set at 3666', cemented W/250 sx of Class C 4# plus 100 sx reg. neat. WOC 24 hours. Tested W/1500#'s 30 mins. Held OK.

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

SIGNED Mary E. Smyke TITLE Agent DATE February 21, 1968

APPROVED BY Joe R. Smyke TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: