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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.

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | 7. Unit Agreement Name |
| 2. Name of Operator Stoltz & Company | 8. Farm or Lease Name Ann |
| 3. Address of Operator c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico | 9. Well No. 1 |
| 4. Location of Well UNIT LETTER H 1980 FEET FROM T.E. North LINE AND 660 FEET FROM East THE 19 LINE, SECTION 11 S TOWNSHIP 33 E RANGE 11 S RANGE 33 E N.M.P.M. | 10. Field and Pool, or Wildcat Undes No. Bagley L Penn |
| 15. Elevation (Show whether DF, RT, GR, etc.) 4311 GL | 12. County Lea |

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.

Cemented 4 1/2" 11.6# N-80 casing at 10,411
with 550 sacks Incor Pozmix, 2% gel, 3# salt
per sack. Plug down 2:30 AM 2/18/69. WOC 48
hours, tested casing with 2000# for 30 minutes,
test O.K.

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

SIGNED A. L. Smith TITLE Agent DATE 2/25/69

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: