		2-					
NO. OF COPIES RECEIVED					Form C-100		
DISTRIBUTION						Supersedes Old C-102 and C-103	
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION						
FILE					<del>"</del>		
U.S.G.S.					5a. Indicate Ty	ype of Lease	
LAND OFFICE					State	Fee	
OPERATOR					5, State Oil &	Gas Lease No. 🗶	
						mmmm	
IDO NOT USE THIS	ır.						
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)						nent Name	
	As				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2. Name of Operator	ELL L_J	OTHER-			8. Form or Lea	ase Name	
X							
3. Address of Operator			M		9. Well No.		
Oil Dev	SFPR	S <b>FP</b> RR					
4. Location of Well			m 70101		10. Field and	Pool, or Wildcat	
900 Pol	k Street,	Amarillo,	Texas 79101	LINE AND	FEET FROM		
ONIT CETTER	((6	_	North	660			
THED	660 _ LINE, SECTION _	<del>-</del>	TOWNSHIP	RANGE	имрм.		
			ation (Show whether I	DE RT GR etc. 37E		<i>11111111111</i>	
	12. County						
10.	Check Ap	opropriate Box	x <del>309-</del> Ind <del>iq</del> ate N	ature of Notice, Rep	ort or Other D		
NO	TICE OF INT	ENTION TO:		SUB	SEQUENT REPORT O	F:	
					_	<del></del>	
PERFORM REMEDIAL WORK		PLU	JG AND ABANDON	REMEDIAL WORK	AL.	TERING CASING	
TEMPORARILY ABANDON				COMMENCE DRILLING OPNS.	PLU	G AND ABANDONMENT	
PULL OR ALTER CASING		CHA	ANGE PLANS	CASING TEST AND CEMENT J	QB		
				OTHER	<u>x</u>		
OTHER							
15 D	Completed Open	entions (Clearly st	tate all pertinent deta	ils and give pertinent date	es, including estimated date	of starting any proposed	
work) SEE RULE 110		dions (creary se	ate are personelle dese	, with good positions in the	.,	, , , , ,	
	_	. 1			ook I bee		
4-28-70:	Ran 158	jts 4g" 10	.5# K-55 ST&C	Casing, set @ 5	O34. KKB		
•	cemented	w/250 ax 3	Incor Poznix	50-50 2% gel, 84	salt sx,		
	3 /)rd CALB	-2 preceded	d by 500 gall	ons of mud flush	. Kan regular		
	guide sh	me: insert	float valve	w/automatic fill	up - WOC 72 hours	B •	
	Casing w	res comentes	d in accordar	ice w/Option 1.			
5-1-70:	Casing t	ested to 1	000 psi for	O minutes period	with no pressure	B	
7-1-10.	drop not			-			
	arop not	,ou					
						_	
18. I hereby certify that t	he information al	bove is true and c	complete to the heet (	f m - lenguilades and haliaf			
. = -,,			complete to the best t	of my knowledge and better.			
	. 2		complete to the best v	or my knowledge and belief.			
0	Sla			or my knowledge and belief.			
SIGNED JOY OF	Sylver		TITLE	or my knowledge and belief	DATE		

Assistant Engineer
>UPERVISOR DISTRIC

MAY 7, 1970 MAY 1 1 19/L

## RECEIVED

MAY 8 1970
OIL CONSERVATION COMM.
HOBBS, N. M.