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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 26 11 19 AM '66

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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"/>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator Humble Oil & Refining Company		5. State Oil & Gas Lease No. K-4495
3. Address of Operator Box 2100, Hobbs, New Mexico		7. Unit Agreement Name -
4. Location of Well UNIT LETTER <u>K</u> , <u>1997</u> FEET FROM THE <u>West</u> LINE AND <u>1837</u> FEET FROM THE <u>South</u> LINE, SECTION <u>16</u> TOWNSHIP <u>8-S</u> RANGE <u>33-E</u> NMPM.		8. Farm or Lease Name New Mexico BX State
		9. Well No. 2
		10. Field and Pool, or Wildcat Chaveroo San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4397 DF		12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK
 TEMPORARILY ABANDON
 PULL OR ALTER CASING
 OTHER _____

PLUG AND ABANDON
 CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK
 COMMENCE DRILLING OPNS.
 CASING TEST AND CEMENT JQB
 OTHER _____

ALTERING CASING
 PLUG AND ABANDONMENT

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.

Sand frac with 40,000 gallons of gelled San Andres water with 1# 20-40 sand per gallon in perforations from 4241, 43, 45, 47, 51, 53, 55, 57, 59, 61, 63, 65, 67, 69, 71, 73, 75, 77, 79, 81, 83, 85, 87, 89, 91, 93, 95, 97, 99 and 4301.

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

SIGNED R.R. Alvarth TITLE Agent DATE May 20, 1966

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: