

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
~~E-8712~~ B-3385

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.)

OIL WELL GAS WELL OTHER

Name of Operator
Casa Petroleum, Inc.

Address of Operator
105 N. 6th Street, Artesia, New Mexico 88210

Location of Well
UNIT LETTER B 990' FEET FROM THE North LINE AND 2310 FEET FROM
THE East LINE, SECTION 21 TOWNSHIP 17S RANGE 34E N.M.P.M.

7. Unit Agreement Name

8. Farm or Lease Name
Gulf State

9. Well No.
#1

10. Field and Pool, or Wildcat
Vacuum Grayburg San And

11. Elevation (Show whether DF, RT, GR, etc.)
4061.0 G/L

12. County
LEA

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 checked="" 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 type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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.

10-18-83

Fraced top San Andres pay from 4705-25 with 20,000 gal. X-Link gel and 20,000 lbs. 20/40 sand.

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

SIGNED [Signature] TITLE Ranger C. Karr, President DATE 10-21-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

OCT. 24 1983

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
OCT 24 1983
O.C.D.
HOBBS OFFICE