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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 <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
#E 5231	

## 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 MINERALS, INC.		8. Farm or Lease Name Bass State
3. Address of Operator P. O. BOX 2215, Hobbs, New Mexico 88240		9. Well No. #3
4. Location of Well UNIT LETTER D, 330 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 18 TOWNSHIP 20 S RANGE 33 E NMPM.		10. Field and Pool, or Wildcat Salt Lake Yates
15. Elevation (Show whether DF, RT, GR, etc.) 3533 DF		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"/>

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.

Dec. 1, 1968: Perf. 2946-48, 2962-65, 2989-90, 2998-99, 3003-04, 3014-15, 3018-19.  
Total 20 shots. Acidized with 2000 gals. 15% NE using 30 ball sealers.  
Max. press. 2100#. Rate 4.3 BPM. Put back on pump.

March 20, 1969: Pumping 3 BO, 5 BWPD.

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 Operations Manager DATE 4/1/69  
APPROVED BY John W. Runyan TITLE  DATE APR 8 1969  
CONDITIONS OF APPROVAL, IF ANY: