NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		
u.s.g.s.		5a. Indicate Type of Lease
LAND OFFICE		State Fee. 🗶
OPERATOR		5. State Oil & Gas Lease No. ,
	_	
SUNDI	RY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PR USE **APPLICA	RY NOTICES AND REPORTS ON WELLS TOPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
l. OIL K GAS		7. Unit Agreement Name
WELL WELL	OTHER-	
2. Name of Operator		8. Farm or Lease Name
imperial-American Manage	ment Company	Alston
3. Address of Operator		9. Well No.
	g., Midland, Texas 79701	1
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER D	330 FEET FROM THE North LINE AND 330 FEET F	Langlie - Mattix
THE West LINE, SECTI	10N 26 TOWNSHIP 25-S RANGE 37-E	PM. (())
·		
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	DF 3042	Lea
Check	Appropriate Box To Indicate Nature of Notice, Report or	Other Data
		ENT REPORT OF:
	,-	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	, LOG AND ABANDONMENT
	OTHER Return well to	production
OTHER		
 Describe Proposed or Completed Operator work) SEE RULE 1103. 	perations (Clearly state all pertinent details, and give pertinent dates, include	ling estimated date of starting any proposed
n an effort to determin	e production capacity of certain Shut in wells	, we have returned them
o production to test.		
I. Pulled rods & pump	. Ran repaired pump. Overhauled surface equipm	ent and put well on prod-
uction.		The same of brown
II. Tested - 2-15-70-		
	r, 18 MCF, GOR 18,000	
III. Present status - p		
111. II de en de en de en de en en	rouncing.	
18. I hereby certify that the information	n above is true and complete to the best of my knowledge and belief.	
st 1 1 2	46.4	
SIGNED CELLY	THILE Operations Superintenden	t_ DATE 4-10-70
	101	
10. M	1/10/20	Comment of the second
APPROVED BY Sosle !!	· Clements	DATE 14 0/U
9 /		
CONDITIONS OF APPROVAL, IF ANY	•	