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NEW MEXICO OIL CONSERVATION COMMISSION C.

AUG 15 2 41 PM '68

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.
K-1348

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 -A" (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 Cabot Corporation	8. Farm or Lease Name N. M. "S" State
3. Address of Operator P. O. Box 4395, Midland, Texas	9. Well No. 1
4. Location of Well UNIT LETTER C, 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 29 TOWNSHIP 10-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 4233' Gr.	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" 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.

Drilled 11" hole to 4070' T. D. Ran 8-5/8" 24# and 32# casing to 4070', cemented with 250 sacks 4% Gel cement and 100 sacks 2% Gel cement with 7# salt per sack. Plug down 1:50 P. M. 7-5-68. After WOC 24 hours casing was tested with 1000 PSI for 30 minutes with no pressure loss.

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

SIGNED <u>Perry C. Quinn</u>	TITLE <u>Dist. Prod. Sup't.</u>	DATE <u>8-14-68</u>
APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		