NO. OF COPIES RECEIVED	7	Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE	7	State X Fee
OPERATOR		5. State Oil & Gas Lease No.
		E-5310
SUNDRY NOTICES AND REPORTS ON WELLS [DO NOT USE THIS FORM FOR PROPOSALS TO CHILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)		
I. OIL A GAS WELL WELL	*); OTHER*	7. Unit Agreement Name 8. Farm or Lease Name
2. Name of Operator		Ohio C - State
Cities Service Company		9. Well No.
3. Address of Operator]
Box 1919 Midland, TX 79702		10. Field and Pool, or Wildcat
4. Location of Well	3080 North 330	Corbin Abo
UNIT LETTER	1980 FEET FROM THE NOrth LINE AND 330 FEET FROM	
East	TION 32 TOWNSHIP 17S RANGE 33E NMPM.	
THELINE, SEC	CTION 32 TOWNSHIP I 15 RANGE 33E NMPM.	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4050' GR	Lea
	k Appropriate Box To Indicate Nature of Notice, Report or Oth INTENTION TO: SUBSEQUENT PLUG AND ABANDON REMEDIAL WORK	REPORT OF:
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	leak survev & X
	oTHER Witnessed casing identification o	i apove ground
отнея	connections from	casingheads.
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.		
	Dug out cellar. Installed riser to surface from valve on each casinghead. Installed a second va on each riser above ground and properly identifieach, as required and witnessed by NMOCD. Melvi Crossland with NMOCD witnessed and approved the	lve ed n
	stallations. Backfilled cellar.	
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		•

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

SIGNED

TITLE REGION Operations Manager

DATE 3/9/79

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: