

NEW MEXICO OIL CONSERVATION COMMISSION

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U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
E-7653

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 GLTTY OIL COMPANY	8. Farm or Lease Name STATE "A11"
3. Address of Operator P.O. BOX 249, HOBBS, NEW MEXICO 88240	9. Well No. 11
4. Location of Well UNIT LETTER 3 , 330 FEET FROM THE NORTH LINE AND 2310 FEET FROM THE EAST LINE, SECTION 7 TOWNSHIP 18-S RANGE 35-T NMPM.	10. Field and Pool, or Wildcat VAC. GRAYBURG S.A.
15. Elevation (Show whether DF, RT, GR, etc.) 3983' RKB	12. County LEA

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <u>FILL CELLAR WITH SAND</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <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.

Installed risers to ground level on all strings. Attached permanent identification tags to each. Filled cellar with sand. Job completed February 27, 1976.

NOTE: Cellar inspected before filling on February 25, 1976 by Mr. John Runyon w/NMOCC.

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

ORIGINAL SIGNED BY:
 SIGNED C. L. Wade TITLE Area Superintendent DATE 2-27-76

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: