

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

AUG 17 1 03 PM '65

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.                     

**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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>T. A.</b>	7. Unit Agreement Name
2. Name of Operator <b>Amerada Petroleum Corporation</b>	8. Farm or Lease Name <b>H. W. Andrews</b>
3. Address of Operator <b>P. O. Box 668 - Hobbs, New Mexico</b>	9. Well No. <b>12</b>
4. Location of Well UNIT LETTER <b>D</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM THE <b>West</b> LINE, SECTION <b>23</b> TOWNSHIP <b>20-S</b> RANGE <b>36-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Eumont</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3585' DF</b>	12. County <b>Lea</b>

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> <p><b>Temporarily Abandoned</b> <input checked="" type="checkbox"/></p>
---	---	--

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.

**FOR RECORD ONLY: To advise this well is still closed in and temporarily abandoned with no other plans at this time.**

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

SIGNED *D. C. App* TITLE **District Superintendent** DATE **8-13-65**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: