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NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE O. C. E.  
APR 6 10 05 AM '66

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

3d. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name
9. Well No.
10. Field and Pool or Wildcat
12. County

**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 ☒ GAS WELL ☐ OTHER-  
2. Name of Operator **Tidewater Oil Company**  
3. Address of Operator **Box 249, Hobbs, New Mexico**  
4. Location of Well  
UNIT LETTER **K**, **1650** FEET FROM THE **South** LINE AND **2310** FEET FROM  
THE **West** LINE, SECTION **27** TOWNSHIP **19-S** RANGE **37-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <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.

**Well shut in pending development of water flood.**

REVISION MUST BE SUBMITTED ON FORM C-103  
DATE AND SIGNATURE

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

Original Signed By SIGNED <b>G. L. WADE</b>	TITLE <b>Area Supt.</b>	DATE <b>4-4-66</b>
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		