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NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 7

9-35-67
a. Judicial Type of Lease
State NM Fee

5. State Oil & Gas Lease No.
E-5558

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- 2. Name of Operator <i>Walter T. L. Maguire</i>	7. Unit Agreement Name
3. Address of Operator <i>Box 412, Hobbs, New Mexico</i>	8. Farm or Lease Name East Eunont Unit
4. Location of Well UNIT LETTER A , 660 FEET FROM THE North LINE AND 988 FEET FROM THE East LINE, SECTION 35 TOWNSHIP 198 RANGE 37E NMPM.	9. Well No. 89
15. Elevation (Show whether DF, RT, GR, etc.) 3603 DF	10. Field and Pool, or Wildcat Eunont
	12. County TAA

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>Convert to Injection well</u> <input checked="" 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.

Ran scrapper to 3921'. Ran 2-3/8" internally plastic coated tubing and Johnson 101-8 packer. Tubing set at 3758', packer at 3724'.

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

SIGNED *Walter T. L. Maguire* TITLE Area Supv. DATE 8-8-67

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: