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NEW MEXICO OIL CONSERVATION COMMISSION

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.
B-2657

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 CONTINENTAL OIL COMPANY	8. Farm or Lease Name State G-16
3. Address of Operator P. O. Box 460, Hobbs, N.M. 88240	9. Well No. 1
4. Location of Well UNIT LETTER M , 330 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 24-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Range 37-E, Section 16, Hobbs Area
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <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.

Spudded 12 1/2" hole on 7-29-74. Drilled to 410' and set 8 5/8" 20" casing. Casing set at 410' and cemented with 260 sacks Class "C" cement. Cement circulated to surface. WOC 18 hours. Tested casing with 1,000" for 30 minutes, held OK.

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

SIGNED: *SKelluth* TITLE: *Alternate for Division Office Manager* DATE: **7-31-74**

APPROVED BY: *Joe D. Ramey* TITLE: *Dist. I. Supv.* DATE: _____

CONDITIONS OF APPROVAL, IF ANY:
NMOCC-5, File