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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 [X] FED. Fee [ ]

5. State Oil & Gas Lease No.
LC 032096(a)

## 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 [X] OTHER-

7. Unit Agreement Name

2. Name of Operator
CONTINENTAL OIL COMPANY

8. Farm or Lease Name
LOCKHART A-27

3. Address of Operator
Box 460, HOBBS, N.M. 88240

9. Well No.
8

4. Location of Well
UNIT LETTER D, 810 FEET FROM THE NORTH LINE AND 660 FEET FROM THE WEST LINE, SECTION 27 TOWNSHIP 21-S RANGE 37-E NMPM.

10. Field and Pool, or Wildcat
~~DEMSEY~~ BLINEBRY (GAS)

15. Elevation (Show whether DF, RT, GR, etc.)
3410' DF

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 [ ] | PLUG AND ABANDON [ ] | | REMEDIAL WORK [ ] | ALTERING CASING [ ] |
| TEMPORARILY ABANDON [ ] | | | COMMENCE DRILLING OPNS. [ ] | PLUG AND ABANDONMENT [ ] |
| PULL OR ALTER CASING [ ] | CHANGE PLANS [ ] | | CASING TEST AND CEMENT JOB [ ] | |
| OTHER [ ] | | | OTHER Re-fill cellar following Csg. Leak Svy. [X] | |

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.

Casing Leak Survey has been conducted on this well by Mr. Leslie A. Clements. Satisfactory connections below ground level and proper identification above ground level have been established. It is now proposed to re-fill the cellar and level the ground around this well.

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

SIGNED [signature] TITLE SR. ANALYST DATE 10-23-74

APPROVED BY Orig. Signed by Joe D. Ramey Dist. Supv. TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC-4, File