

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

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- Carbon Dioxide	7. Unit Agreement Name
2. Name of Operator Etheldred T. Ross	8. Farm or Lease Name Hayoz
3. Address of Operator Box 476, Panhandle, Texas 79068	9. Well No. # 5
4. Location of Well UNIT LETTER J 660 FEET FROM THE North LINE AND 660 FEET FROM West 14 TOWNSHIP 19N. RANGE 30 E. NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 4483	12. County Harding

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 JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input checked="" 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.

I ask for an extension of time on API # 30-021-20185

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 5-16-84
UNLESS DRILLING UNDERWAY

RECEIVED
MAY 24 1984
OIL CONSERVATION DIVISION
SANTA FE

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

SIGNED <u>E. T. Ross</u>	TITLE <u>Operator</u>	DATE <u>May 21, 1984</u>
APPROVED BY <u>Carol Wilcox</u>	TITLE <u>DISTRICT SUPERVISOR</u>	DATE <u>5-25-84</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED DRILLING IN NORWAY
RIGHT EXPIRES
NOT VALID AFTER FOR