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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

DEC - 2 1977

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT - 111 (OIL) OR 112 (GAS) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Cities Service Company		8. Farm or Lease Name Fort Union
3. Address of Operator P.O. Box 1919 Midland, TX 79702		9. Well No. 1
4. Location of Well UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM East THE LINE, SECTION 33 TOWNSHIP 20N RANGE 19E N.M.P.M.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, CR, etc.)		12. County Mora

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 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"/>
OTHER <input 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.

T.D. 2359'. sand.

Ran 57 joints (2344.31') of 8-5/8" OD, 24#, K55, 8R, ST&C Casing set at 2359.00' & cemented with 400 sacks of Class C thickset with 10# Gilsonite 1/4# Flocele & 2% CaCl followed by 300 sacks Class C with 2% CaCl. PD at 0550 MST, 11/19/77. Bumped plug with 800#. WOC 12 hours. Tested BOP and casing to 1000# - OK.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>E. Smith</u>	TITLE <u>Region Operations Manager</u>	DATE <u>Nov. 22, 1977</u>
APPROVED BY <u>Carl Ulling</u>	TITLE <u>REGIONAL MANAGER</u>	DATE <u>12-2-77</u>
CONDITIONS OF APPROVAL, IF ANY:		