NO. OF COPIES *CCEIVED			~			_	Form C-103
DISTRIBUTION	2	\prod			RECEIVI	E	Supersedes Old
SANTA FE			NEW MEXICO	DIL CONS	ERVATION COMMISSI	ON	C-102 and C-103 Effective 1-1-65
FILE	1/				JUL 9 1	002	
U.S.G.\$.	1/				30L 3 1.	302	Sa. Indicate Type of Lease
LAND OFFICE		\perp			O. C. D		State X Fee
OPERATOR		لـــــا			, ARTESIA, OFF		5. State Cn. & Gas Lease No.
							L 7013
	SU CORNA FO	NDR	Y NOTICES AND REPORT OF THE PERMIT - " IF DRING C-1	RTS ON	WELLS BACK TO A DIFFERENT RESER TH PROPOSALS.)	IVOIR.	
	s]	OTHER Dry Hol	е			7. Unit Agreement Name
2. Name of Operator	a						8. Furm or Lease Name
Cities Service Company V 3. Address of Operator							State DU Com
P.O. Box 1919 -	. Mid	i Hanc	Toyac 70702	•			3, Well 140.
4. Location of Well	PHO	так	1, 1exas 79702				10. Field and Pool, or, Wildgat
	·		660 FEET FROM THE	North	LINE AND	FEET FROM	Undesignaged/Morrow
Most			a	220	26E		
THE WEST	LINE,	SECTIO	N TOWNSHIP		RANGE ZOL	NMPM.	
mmmm	777	$\mathcal{I}\mathcal{I}\mathcal{I}$	15. Elevation (Sho		DF, RT, GR, etc.)		12. County
			3309' GR		. , , ,	•	Eddy
16.	7777				January of Nigation D		
NOT			Appropriate Box To In	dicate v		=	
NOI	ICE C	או אנ	ITENTION TO:		50	ואסבעטבאו	REPORT OF:
PERFORM REMEDIAL WORK			PLUG AND ABA	ANDON [REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	=		7200 200 202	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	COMMENCE DRILLING OPN		PLUG AND ABANDONMENT X
PULL OR ALTER CASING	Ħ		CHANGE PLAN	s 🗍	CASING TEST AND CEMEN	H	
,					OTHER		
OTHER							
					<u> </u>		
17. Describe Proposed or work) SEE RULE 1103		ted Op	erations (Clearly state all pe	rtinent det	ails, and give pertinent do	ates, including	estimated date of starting any proposed
r							
T.D. 163' River	. Roc	k.	This well was plu	aaed ar	nd abandoned in	the follo	wing manner:
1.0. 103 1000	100	1	THIS WELL WAS PLA	ggca a	ia abandonea in	uic rorre	wing name.
	1.	Spc	otted a 2.1 cu. ya	rd Red	i-Mix cement sur	face plug	@ 163 - 0'.
		-r-	, oooa a mil out ja				
	2.	Ins	stalled a 4" dry h	ole ma	rker to designat	e a plugg	ed and abandoned
			cation.			1 32	
			•				
				•			
						•	
			•				
	•				Ŧ		
18. I hereby certify that th	e infor	mation	above is true and complete t	o the best	of my knowledge and belie	ef.	
0		(7				
SIGNED CONTACT OF	1.1	لر	Start	TITLE Rec	gion Opr. Mgr	Prod.	DATE 7-8-82
			-				
							0.475