NO. OF COPIES RECEIVED		
DISTRIBUTION		Form C-103 Supersedes Old
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
FILE	THE MEXICO OF CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee
OPERATOR /		5. State Oil & Gas Lease No.
	·	K-1883
SUNDRY	Y NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROP USE **APPLICATION	Y NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR ON FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL 57		7. Unit Agreement Name
WELL WELL	OTHER-	-
2. Name of Operator	2.0	8. Form or Lease Name
	Co	Chwell
3, Address of Operator	S 6 0211	9. Well No.
124 Jackson	Mite alluquerque, n.m	Ditt.
4. Location of Well	10-	10. Field and Pool, or Wildcat
UNIT LETTER,	FEET FROM THE LINE AND	Maco Wash-Mesa Yerde
11/		
THE LINE, SECTION	TOWNSHIP 20 N RANGE 9W	NMPM. ((((())))
mmmmmmm		
	1'. Elevation (Show whether DF, RT, GR, etc.)	18 Compt
16.		Mychiney
Check A <sub>1</sub>	ppropriate Box To Indicate Nature of Notice, Repor	t or Other Data
NOTICE OF INT	FENTION TO: SUBSI	EQUENT REPORT OF:
	<del></del>	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ASANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
OTHER	OTHER	
OTHER		
17. Describe Proposed or Completed Oper	rations (Clearly state all persinent details, and give pertinent dates,	including estimated date of starting any proposed
work) SEE RULE 1103.		and the state of t
41.		
This well to	's dry and well be about	oned.
	penedeo From Borron of	•
70 38 7	Mulheo From Bettom of A	4016
WITH 20	SACKS OF GENERT (APPRO	(160')
1		
	VITH MUD AND CEMENTED AT	SARFALE
To HOLD	MARKUR.	
		A Contract of
18. I hereby certify that the information ab	ove is true and complete to the best of my knowledge and belief.	
$\nu + \iota$		
SIGNED / PCAULO	un Engineer	DATE 3/17/7/
O Ala	7 // Orangarana nama esta	
APPROVED BY CHUMN UN	SUPERVISOR DIST, #3	DATE MAY 2 4 1971
CONDITIONS OF APPROVAL. IF ANY:		
/		

Vet 10.