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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 <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
30-045-22531

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>	
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole held for SWD.	7. Unit Agreement Name
2. Name of Operator Dome Petroleum Corp.	8. Farm or Lease Name Santa Fe 20
3. Address of Operator K & A, Inc. Minerals Management, Suite 105, 501 Airport Dr., Farmington, N. M. 87401	9. Well No. 2
4. Location of Well UNIT LETTER F 2150 FEET FROM THE N LINE AND 1980 FEET FROM THE W LINE, SECTION 20 TOWNSHIP 21N RANGE 8W NMPM.	10. Field and Pool, or Wildcat Snake Eyes Entrada
15. Elevation (Show whether DF, RT, GR, etc.) 6568 GR, 6580 RKB	12. County San Juan

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"/> TEMPORARILY ABANDON <input checked="" type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <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.

This well was cased, cemented to surface, by operator for use as a produced water disposal well when electricity becomes available.
(Estimated time of eight months).
Request classification as Temporarily Abandoned.

TEMPORARY ABANDONMENT
EXPIRES
JUN 15 1970

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

SIGNED <u>SE Lankford</u>	TITLE <u>K & A, Inc. Minerals Management Area Manager</u>	DATE <u>6-13-78</u>
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APPROVED BY AR. Kendrick TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: