| NO, OF COPIES RECEIVED | Form C-103 Supersedes Old |
|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DISTRIBUTION | C-102 and C-103 |
| SANTA FE / NEW MEXICO OIL CONSERVATION COMMISSION | Effective 1-1-65 |
| FILE | 5a. Indicate Type of Lease |
| U.S.G.S. | State Fee X |
| LAND OFFICE | 5, State Oil & Gas Lease No. |
| OPERATOR 7 | 3. State Oil & Gas Feder 140. |
| | mminmm |
| 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.) | 7. Unit Agreement Name |
| 1. OIL XX GAS OTHER- | ,, our rigidement reme |
| WELL OTHER- 2. Name of Operator | 8. Farm or Lease Name |
| · · · · · · · · · · · · · · · · · · · | Santa Fe-Barbs |
| Dome Petroleum Corp. 3. Address of Operator | 9. Well No. |
| 501 Airport Drive, Suite 107, Farmington, N.M. 87401 | 1 |
| 4. Location of Well | 10. Field and Pool, or Wildcat |
| 1 | Wildcat-Entrada |
| UNIT LETTER M . 990 FEET FROM THE SOUTH LINE AND 500 FEET FROM | MIIGGE-FIICIAGA |
| 21 21 100 | |
| THE West LINE, SECTION 10 TOWNSHIP 21N RANGE 10W NMPM. | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| | San Juan |
| 6404' GR. | |
| Check Appropriate Box To Indicate Nature of Notice, Report or Oth | er Data |
| NOTICE OF INTENTION TO: SUBSEQUENT | REPORT OF: |
| | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON COMMENCE DRILLING OPHS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB Spud & Set Su | rfo.co - |
| OTHER Spud a Set St | litace |
| OTHER | |
| 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. | , , , , |
| | |
| 10/9/78 - Spudded 13 3/8" hole at 5:00 P.M. 10/9/78 | |
| 10/7/70 Opaded 25 5/6 11020 de 5/00 11020 de 5/0/7/ | |
| - Ran 4 joints (185') 9 5/8" O.D., 32.3#, H-40, ST&C Casing. | |
| , , , , , , , , , , , , , , , , , , , , | |
| Set at 197' KB. Cemented with 200 sx Class "B" Cement with | |
| 3% CaCl. Plug down at 1:15 A.M. 10/10/78. Circulated ceme | ent. |
| 3,0 32320 2238 2230 22 2 23 2 | |
| | |
| | The state of the s |
| | |
| | |
| | |
| | |
| | |
| | 1 00,000 |
| | |
| | |
| | and her week to |
| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. | |
| | |
| SIGNED J. Amodhel Derations Manager | 10-19-78 |
| SIGNED TITLE OPERALIONS MANAGER | DATE |
| | |
| Original Signed by A. R. Kendrick APPROVED BY | 00.25 3/0 |
| APPROVED BY TITLE DUTERTY IDON 2-2- | DATE |

CONDITIONS OF APPROVAL, IF ANY: