N . OF COPIES RECEIVED	3		Form C-103 Supersedes Old
DISTRIBUTION			C-102 and C-103
SANTAFE	1/	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	+'+-		5a. Indicate Type of Lease
U.S.G.S.	+		State Fee X
OPERATOR	+/+	-	5. State Oil & Gas Lease No.
			Fee
(DO NOT USE THIS FO	SUND	RY NOTICES AND REPORTS ON WELLS TOPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS	X	OTHER-	7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name Emma McDanie1
Trans Delta 3. Address of Operator	011 &	Gas Company, Inc. (for Shar Alan Oil Company)	9. Well No.
	Rank	76116 Building, 6300 Ridglea Place, Fort Worth, Texas	2
4. Location of Well			10. Field and Pool, or Wildcat
G G		1850 FEET FROM THE North LINE AND 1850 FEET FROM	So. Blanco PC
!			
THE East	LINE, SEC	TON 22 TOWNSHIP 24N RANGE 1W NMPN	
mmmm	m	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		7159 g1	Rio Arriba
16.	Chec	Appropriate Box To Indicate Nature of Notice, Report or O	
NOTI		INTENTION TO: SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK		PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	_	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT X
PULL OR ALTER CASING		CHANGE PLANS CASING TEST AND CEMENT JQB	
OTHER			
		Charles including and sing portions dates including	or estimated date of starting any proposed
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.			
October 10, 1978 well was plugged and abanoned by the following:			
October 10, 1970 well was pragged and abandons by the			
Cover perforations from 2840-2850 and from 2885-2904 with cement.			
50' in and out of stub with cement. Set surface cement.			
Set surface marker and level location in accordance with New			
Mexico Oil & Gas Commission regulations.			
			· · · · · · · · · · · · · · · · · · ·
			and the second
			(10)
			JAN 29 1979
			OIL CON. COM.
			DIST. 3
18. I hereby certify that the	e informa	on above is true and complete to the best of my knowledge and belief.	
signed Mul	3 1	Darks Land Department	1/25/79
V	1 /	SUPERVISOR DIST. 43	
APPROVED BY	/ X0	SUFFEVISOR DIVER 1	DATE 1-29-79
CONDITIONS OF APPROV	AL. IF	NY:	
30,45,7,0,45 07 27 27		_	