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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. State Oil & Gas Lease No. E-6597
2. Name of Operator (Weldon S. Guest & I. J. Wolfson) Sun Oil Co.		7. Unit Agreement Name Central Bisti
3. Address of Operator 1011 Hamilton Bldg., Wichita Falls, Texas 76301		8. Farm or Lease Name Kelly State CBU
4. Location of Well UNIT LETTER CBU 330 FEET FROM THE N LINE AND 2310 FEET FROM THE W LINE, SECTION 16 TOWNSHIP 25N RANGE 12W NMPM.		9. Well No. CBU-410
15. Elevation (Show whether DF, RT, GR, etc.) 6304 GR		10. Field and Pool, or Wildcat Bisti (Lower Gallup)
12. County San Juan		

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

7. 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.

20 sacks plug across Gallup sand - 4618-4718
40 sacks plug in and out of stub
60 sacks plug 1040-1190
40 sacks plug 125-225
2 sacks plug in top of 10-3/4 surface

Intend to start operations upon approval.



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

WELDON S. GUEST & I. J. WOLFSON TITLE Partner DATE 2-1-71

ROVED BY Eugene A. Ames TITLE Sup Dist III DATE 2-3-71

CONDITIONS OF APPROVAL, IF ANY: