

CORRECTED REPORT

Form C-100
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

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SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	2

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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.)

1. OIL <input type="checkbox"/> WELL GAS <input checked="" type="checkbox"/> WELL OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Aztec Oil & Gas Company		8. Farm or Lease Name F. J. Titt
3. Address of Operator P. O. Drawer 570, Farmington, New Mexico		9. Well No. #2
4. Location of Well UNIT LETTER <u>M</u> <u>850</u> FEET FROM THE <u>West</u> LINE AND <u>1070</u> FEET FROM THE <u>South</u> LINE, SECTION <u>35</u> TOWNSHIP <u>31 North</u> RANGE <u>11 West</u> N.M.P.M.		10. Field and Pool, or Wildcat Basin Dakota
15. Elevation (Show whether DF, RT, GR, etc.) 5766 GR		12. County San Juan

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

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

PROPOSE TO:

- (1) Pull Tubing.
- (2) Plug Dakota Formation.
- (3) Perf & Frac Mesaverde Formation.
- (4) Run 1½" Tubing.
- (5) Return To Production.



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

SIGNED [Signature] TITLE District Superintendent DATE April 13, 1973
APPROVED BY [Signature] TITLE SUPERVISOR DIST. #3 DATE APR 16 1973
CONDITIONS OF APPROVAL IF ANY: