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LAND OFFICE		
OPERATOR		

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

NEW MEXICO OIL CONSERVATION COMMISSION

SEP 7 9 '69

5a. Indicate Type of Lease
State ☐   Fee. **X**

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 WELL ☐   GAS WELL ☐   OTHER- **Dry Hole**

7. Unit Agreement Name

2. Name of Operator

J.M. Huber Corporation

8. Farm or Lease Name
Santa Fe "22"

3. Address of Operator

1900 Wilco Building, Midland, Texas 79701

9. Well No.
1

4. Location of Well

UNIT LETTER **B** , **330** FEET FROM THE **North** LINE AND **2310** FEET FROM

THE **East** LINE, SECTION **22** TOWNSHIP **10-S** RANGE **36-E** NMPM.

10. Field and Pool, or Wildcat
S. Crossroads Strawn

15. Elevation (Show whether DF, RT, GR, etc.)
4009' GR

12. County
Lea

16.
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER _____	☐
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.

```
Shot off and pulled 3528' 5-1/2" casing.
Shot off and pulled 1040' 8-5/8" casing.
Set cement plugs as follows:

25 sx  3578' - 3478'
25 sx  1090' -  990'
25 sx   360' -  300'
10 sx in top

Installed marker.  Plugged and abandoned 9/5/69.
```

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

SIGNED _____   TITLE **District Production Supt.** DATE **9/5/1969**

APPROVED BY _Nathan E. Clegg_   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: