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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 18 1 40 PM '65

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

5a. Indicate Type of Lease
State ☐ Fee ☒
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator GREAT WESTERN DRILLING COMPANY	8. Farm or Lease Name ODC "C"
3. Address of Operator P. O. Box 1659, Midland, Texas	9. Well No. 2
4. Location of Well UNIT CENTER L 660 FEET FROM THE West LINE AND 1980 FEET FROM South LINE, SECTION 4 TOWNSHIP 9-S RANGE 37-E N.M.P.M.	10. Field and Pool, or Wildcat Allison-Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4024 GR	12. County Lea

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

PERFORM REMEDIAL WORK <input 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 checked="" type="checkbox"/>
DRILL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

The hole was loaded with 10# mud and a 25 sack cement plug spotted @ 9656'.
Shot and pulled 5130' of 4-1/2 . 25 sacks of cement were spotted @ 5138' and
25 sacks @ 4166'. The 7-5/8 casing was shot and pulled @ 1121'. 25 sacks were spotted
@ 1120', 25 sacks @ 305' and 10 sacks at the surface. Plugged and abandoned (8-10-65).

A proper marker will be placed and a cleanup made.

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

SIGNED O. H. Crews TITLE Administrative Coordinator DATE August 17, 1965

APPROVED BY Leola V. Williams TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: