| NO. OF COPIES RECEIVED  |  |                         |                                       | Form C-103   |
|---|--|-------------------------|---------------------------------------|--|
| DISTRIBUTION  |  |                         |                                       | Supersedes Old<br>C-102 and C-103  |
| SANTA FE  | NEW MEXICO OIL CONSERVATION COMMISSION |                         |                                       | Effective 1-1-65   |
| FILE  | 7.2                                    |                         |                                       |  |
| U.S.G.S.  | 1                                      |                         |                                       | 5a. Indicate Type of Lease   |
| LAND OFFICE   | _                                      |                         |                                       | State Fee.   |
| OPERATOR  |  |                         |                                       | 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 GAS WELL   | OTHER-                                 |                         |                                       | 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.  |
|   |  |                         |                                       | 10. Field and Pool, or Wildcat   |
| 4. Location of Well  P  UNIT LETTER   | 660 FEET FROM THE                      | East                    | ANDFEET FROM                          | Allison-Pennsylvanian  |
| THE South LINE, SEC   | TION TOWNS                             | 9-S                     | ANGE 37-E NMPN                        |  |
|   |  |                         |                                       |  |
|   | 15, Elevation (                        | Show whether DF, RT     | GR, etc.)                             | 12. County   |
|   |  | 4023 GR                 | · · · · · · · · · · · · · · · · · · · | Lea  |
| Check   | Appropriate Box To                     | Indicate Nature         | of Notice, Report or O                | ther Data  |
|   | INTENTION TO:                          |                         | SUBSEQUEN                             | IT REPORT OF:  |
| _   |  | <b>Y</b>                | ·—                                    |  |
| PERFORM REMEDIAL WORK   | PLUG AND                               |                         | IAL WORK                              | ALTERING CASING  |
| TEMPORARILY ABANDON   |  | <del></del>             | INCE DRILLING OPNS.                   | PLUG AND ABANDONMENT   |
| PULL OR ALTER CASING  | CHANGE PI                              |                         | TEST AND CEMENT JOB                   |  |
|   |  | OT!                     | 1ER                                   |  |
| OTHER   |  | <del></del>             |                                       |  |
| 17. Describe Proposed or Completed  | Operations (Clearly state al           | pertinent details, and  | l give pertinent dates, includin      | ig estimated date of starting any proposed   |
| work) SEE RULE 1103.  |  |                         |                                       |  |
| The hole  | will be loaded wit                     | th 10 # mud.            | The pay zone 9662                     | - 9666 will be covered   |
|   | 1 222 : 053                            | E! (7m -1mm)            | no aut and mull 600                   | 00' of 4 1/2" A 25 B   |
| with a 25 sack  | plug 9700 to 957                       | o. we pran              | to cut and buil oo                    | 00' of 4 1/2". A 25 a  |
| sack plug will  | be placed @ 5500                       | ', 25 sacks @           | 4160 (shoe of 7 5                     | /8). This 7 5/8" will  |
| be cut and pul  | led at some 600'.                      | A 25 sack p             | lug will be placed                    | in the stub, 25 sacks  |
| in the shoe of  | the 10 3/4 @ 276                       | and 10 sack             | s @ surface.                          |  |
| A cleanup   | and marker will                        | be made.                |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
|   |  |                         |                                       |  |
| 18, I hereby certify that the informat  | den about to torre and counts          | te to the heat of my be | owledge and belief.                   |  |
| 18. I hereby certify that the informat  | nou spoke is time sud combie           | to time perior my at    |                                       |  |
| CX T  | O N Crous                              | Admini                  | strative Coordinat                    | or DATE June 2, 1965   |
| SIGNED XT SCCCIO  | V. N. CIEWS                            | TITLE NUMBER            |                                       | VALLE CONTRACTOR OF THE PROPERTY OF THE PROPER |
| (   |  |                         |                                       |  |
|   |  | - 1 - 1 - F             |                                       | DATE   |
| APPROVED BY   |  | TITLE                   | 1111                                  | of the the   |
| CONDITIONS OF APPROVAL, IF  | INY:                                   |                         | 1 210 19                              | y 24 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |
| 21 11/  | 1                                      | /                       | 1/                                    |  |
|   |  |                         |                                       |  |