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NEW MEXICO OIL CONSERVATION COMMISSION

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.
E-8904

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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☒ OTHER <i>Shut in Disposal Well</i>	7. Unit Agreement Name
2. Name of Operator <i>Ralph Lowe</i>	8. Farm or Lease Name <i>Markham State</i>
3. Address of Operator <i>P.O. Box 832, Midland, Texas 79701</i>	9. Well No. <i>2</i>
4. Location of Well UNIT LETTER <i>J</i> <i>1980</i> FEET FROM THE <i>South</i> LINE AND <i>1980</i> FEET FROM THE <i>East</i> LINE, SECTION <i>32</i> TOWNSHIP <i>11-S</i> RANGE <i>38-E</i> N.M.P.M.	10. Field and Pool, or Wildcat <i>Gladiola (Dev.)</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3894 DF</i>	12. County <i>Lea</i>

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

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

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.

Well Plugged on June 18, 1968 as follows:
Set Cast Iron Bridge Plug at 5000' with 5 sacks Cement
on top of plug. Recovered 4350' 5 1/2" casing. Put
50 Sack Cement at stub 5 1/2" casing at 4350'. Put 10 Sack
Cement Plug at surface w/ 4' regulation Marker.
Will Notify Commission when Location is ready for
inspection.

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

SIGNED *John W. Ramsey* TITLE *agent* DATE *7/2/68*

APPROVED BY *John W. Ramsey* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: