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HOBBS OFFICE O. C. C.  
 NEW MEXICO OIL CONSERVATION COMMISSION  
 JUN 2 11 33 AM '67

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

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 <i>Ralph Lowe</i>	8. Form or Lease Name <i>State "A"</i>
3. Address of operator <i>PO Box 832, Midland, Texas 79701</i>	9. Well No. <i>2</i>
4. Location of Well UNIT LETTER <i>F</i> <i>1980</i> FEET FROM THE <i>West</i> LINE AND <i>1980</i> FEET FROM THE <i>North</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>State (Derrick)</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3888 GL</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 <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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <i>Well Temporarily Abandoned</i> <input checked="" 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.

*Well shut in and Temporarily abandoned. Maybe put back on production at a later date.*

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

SIGNED *Leslie A. Clements* TITLE *agent* DATE *6/1/67*

APPROVED BY *Leslie A. Clements* TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: