NUMBER OF COPIES RECEIVED  DISTRIBUTION				
FILE				
U.\$.G.S.				
LAND OFFICE				
TRANSPORTER	011		- 1	
	G.A	. 5		
PROPATION OFFICE				

## NEW ME... JO OIL CONSERVATION COMMISSION

Sánta Fe, New Mexico

HOBBS OFFICE O. C. C.

NOTICE OF INTENTION TO DANLY 10 14 AM '64

Notice must be given to the District Office of the Oil Conservation Commission and approval obtained before drilling or recompletion begins. If changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. Submit this notice in QUINTUPLICATE. One copy will be returned following approval. See additional

OPERATOR instructions in Rules and Regulations of the Commission. If State Land submit 6 Copies. Attach Form C-128 in triplicate to first 3 copies of Form C-101. Abilene, Texas August 3, 1964 (Place) (Date) OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO Gentlemen: You are hereby notified that it is our intention to commence the Drilling of a well to be known as **Coastal States Gas Producing Company** (Company or Operator) Southern Minerals State \_, Well No. The well is (Lease) 660 1980 North feet from the\_ located\_ line and feet from the East 21 line of Section NMPM. Undesignated (GIVE LOCATION FROM SECTION LINE) Pool. \_\_County OG-5083 If State Land the Oil and Gas Lease is No. If patented land the owner is D C В A ROTARY We propose to drill well with drilling equipment as follows:  $\mathbf{X}_{\!H}$ E  $\mathbf{F}$ G The status of plugging bond is\_\_\_ Cactus Drilling Company L K Ι Drilling Contractor\_\_\_ P  $\cap$ M N San Andres We intend to complete this well in the\_\_\_ 4600 formation at an approximate depth of\_ feet. CASING PROGRAM We propose to use the following strings of Casing and to cement them as indicated: Size of Hole Size of Casing Weight per Foot New or Second Hand Depth Sacks Cement 12-5" 8-5/8" 24# 250° 200 New 4-3" 7-7/8" 10.5# 20 4550' 30 If changes in the above plans become advisable we will notify you immediately. ADDITIONAL INFORMATION (If recompletion give full details of proposed plan of work.) Approved\_ Sincerely yours, Except as follows: COASTAL STATES, GAS PRODUCING COMPANY Company or Operator) ourans

Production Superintendent Position

Send Communications regarding well to Coastal States Gas Producing Co. Name

P. O. Box 385, Abilene, Texas