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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 <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-8301	

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole		7. Unit Agreement Name
2. Name of Operator J.M. Huber Corporation		8. Farm or Lease Name Gulf-State "A"
3. Address of Operator 1900 Wilco Building, Midland, Texas 79701		9. Well No. 1
4. Location of Well UNIT LETTER 0 , 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 23 TOWNSHIP 11-S RANGE 34-E NMPM.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 4156 DF		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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <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.

RTD 12,461'.
Spudded 7/18/1964. Ran 13-3/8" 48 & 54# casing, set at 356' and cemented with 245 sx. WOC 12 hours. Pressure tested casing to 1000# for 30 minutes, held OK.
Ran 8-5/8" 24 & 32# casing, set at 4116', cemented w/200 sx. WOC 18 hours. Pressure tested casing to 1000# for 30 minutes, held OK.

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

SIGNED TITLE District Production Supt. DATE 2/12/1969

APPROVED BY TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: