

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

# 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.	<b>OG 670</b>

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 <b>Flying "M" (S) Unit</b>
2. Name of Operator <b>Coastal States Gas Producing Company</b>	8. Farm or Lease Name <b>Flying "M" (S) Un. Tr 4</b>
3. Address of Operator <b>P. O. Box 235, Midland, Texas 79701</b>	9. Well No. <b>2</b>
4. Location of Well UNIT LETTER <b>J</b> , <b>1980</b> FEET FROM THE <b>south</b> LINE AND <b>1980</b> FEET FROM THE <b>17</b> LINE, SECTION <b>17</b> TOWNSHIP <b>9S</b> RANGE <b>33E</b> NMPM.	10. Field and Pool, or Wildcat <b>Flying "M" (S) Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <b>Lea</b>

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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <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.

The well 4-2 will be temporarily abandoned. The casing will be pulled and the well  
casing for possible future use.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <b>Joe P. Hammond</b>	TITLE <b>Division Production Manager</b>	DATE <b>January 22, 1971</b>
APPROVED BY <b>Joe P. Hammond</b>	TITLE <b>SUPERVISOR DISTRICT</b>	DATE <b>JAN 27 1971</b>
CONDITIONS OF APPROVAL, IF ANY:		