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NEW MEXICO OIL CONSERVATION COMMISSION

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"/>	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator Sun Oil Company	5. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 2792, Odessa, Texas 79760	7. Unit Agreement Name
4. Location of Well UNIT LETTER D 660 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 7 TOWNSHIP 11 S RANGE 34 E NMPM.	8. Farm or Lease Name New Mexico "C" State
	9. Well No. 2
	10. Field and Pool, or Wildcat Inbe-Penn, Bough "C"
15. Elevation (Show whether DF, RT, GR, etc.) 4204 Gr.	12. County LEA

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER **Workover** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

MI, RU - Install BOP. Pull tubing, remove downhole equipment. Add required tubing and rerun tubing w/Baker production tube. Acidize perms. w/4000 gal. CRA acid and RCN ball sealers. Follow with 60 bbls. treated brine. SI well for minimum time. Swab well. If flowing or not, kill well w/treated brine water and pull tubing. Dress Baker locator seal assembly and add downhole equipment. Run tubing and re-seat in Baker "D" packer. Remove BOP, rig down and move out.

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

SIGNED J. E. Edison TITLE Area Superintendent DATE 10-31-66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: