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

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- Temporarily Abandoned	7. Unit Agreement Name
2. Name of Operator TEXAS PACIFIC OIL COMPANY	8. Farm or Lease Name J. P. Collier
3. Address of Operator P.O. Box 1069 - Hobbs, New Mexico	9. Well No. 2
4. Location of Well UNIT LETTER B , 660 FEET FROM THE North LINE AND 2130 FEET FROM 2320 THE East LINE, SECTION 10 TOWNSHIP 11-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat Bagley Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4264.4 GL	12. County Lea

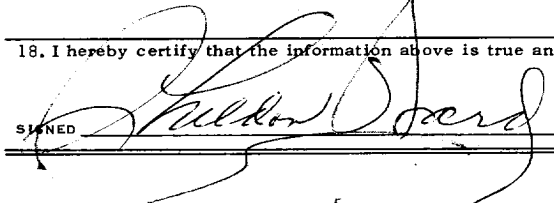
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER Recomplete in Upper Penn <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <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.

PROPOSED STARTING DATE - 2-14-66

1. Move in and rig up unit.
2. Run tubing w/packer and squeeze off perfs. 9040-9050'; 9066-9078'.
3. Drill out cement and bridge plug @ 9150'.
4. Set EP w/2 sks. cement on top @ 9590'.
5. Perforate 9516-9524' w/1 SPF.
6. Run tubing w/packer.
7. Acidize w/1000 gal. acid.
8. Swab test.
9. Set hydraulic pumping equipment if necessary.

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

SIGNED  TITLE **Area Superintendent** DATE **2-10-66**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: