1337	
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			HODA	
NO. OF COPIES RECEIVED	HOBBS OFF G-103			
DISTRIBUTION			Supersette 101d	e C
SANTA FE	NEW MEXICO OIL COM	ISERVATION COMMISSION	Difective 1-1-65	υ,
FILE			10 40 M oc	.
U.S.G.S.			5a. Indicate Type	Lease
LAND OFFICE			State X	Fee.
OPERATOR			5. State Oil & Gas I	Lease No.
•			E-7425	
SUNDRY	NOTICES AND REPORTS O	N WELLS		
(DO NOT USE THIS FORM FOR PROPOS USE **APPLICATION	SALS TO DRILL OR TO DEEPEN OR PLUG FOR PERMIT - ** (FORM C-101) FOR S	BACK TO A DIFFERENT RESERVOIR UCH PROPOSALS.)		
l. OIL GAS			7. Unit Agreement N	/ame
WELL WELL	OTHER- B&A			
2. Name of Operator			8. Farm or Lease N	ame
TEXAS PACIFIC OIL COMPAN	J Y		State MAGM	
3. Address of Operator			9, Well No.	
P.O. Box 1069 - Hobbs, New Mexico		1	****	
4. Location of Well		10. Field and Pool,	or Wildcat	
UNIT LETTER G. 23	310 FEET FROM THE North	LINE AND 1980 :	FEET FROM San Andres	
		_		
THE East LINE, SECTION	15 TOWNSHIP 1) RANGE 36	имрм. (())	

	15. Elevation (Show wheth	er DF, RT, GR, etc.)	12. County	
	40031		Lea	
Check Ap	propriate Box To Indicate	Nature of Notice, Repor	rt or Other Data	
NOTICE OF INT			EQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING	CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND	ABANDONMENT K
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB		
_		OTHER		
OTHER]		
				<u> </u>
17. Describe Proposed or Completed Opera work) SEE RULE 1103.	itions (Clearly state all pertinent d	etails, and give pertinent dates,	including estimated date of sta	rting any propose
COMMENCED OPERATIONS 2-9)_ 66			
1. Rigged up casing pul	lling unit and remove	i well head equipmen	nt.	
				•
2. Spot drilling mud fi	rom TD (4980) to 490	D†•		
3. Set C.I.B.P. @ 4900	w/25 sks. cement on	plug.		
4. Cut off casing @ 422	28 and spot 25 sks.	cement at cut off.		
5. Pulled 5-1/2" csg. 8	and ran tbg. Circula	ted fluid from hole	w/drilling mud.	
6. Spot 10 sks. cement	plug at surface and :	installed dry hole	marker.	
•				
7. Cleaned location and	i filled cellar.			
·				
COMPLETED 2-13-66				
+ 35 g				
)		h of my length described to		
18. I hereby certify that the information ab	ove as true and complete to the bes	t of my knowledge and belief.		
	7 L 0			,,
SIGNED Attack	TOTELL TITLE	Area Superintend	ent	-66

APPROVED BY			DATE	

CONDITIONS OF APPROVAL, IF ANY