16. Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65 Sa. Indicate Type of Lease State State Cill & Gas Lease No. 5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name State of New Mexico * 9. Well No. 3 10. Field and Pool, or Wildcat
SANTA FE       Image: Santa FE         FILE       Image: Submer Solution of the proposal state of the	Supersedes Old C-102 and C-103 Effective 1-1-65 Sa. Indicate Type of Lease State State Fee. 5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name State of New Mexico * 9. Well No. 3 10. Field and Pool, or Wildcat
FILE       Image: Superior of the section	Effective 1-1-65          Sa. Indicate Type of Lease         State         S. State Oil & Gas Lease No.         7. Unit Agreement Name         8. Farm or Lease Name         State of New Mexico         9. Well No.         3         10. Field and Pool, or Wildcat
U.S.G.S. LAND OFFICE OPERATOR USE THIS FORM FOR PROPOSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 1. OIL Company 3. Address of Operator Sum Oil Company 3. Address of Operator F. O. Box 2792, Odessa, Texas 4. Location of Well UNIT LETTER C 660 FEET FROM THE North LINE AND 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE NORTH 10 S RACE 32 E MMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 4.317 Gr. 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTERVIEW.	Sa. Indicate Type of Lease         State       Fee         S. State Oil & Gas Lease No.         7. Unit Agreement Name         8. Farm or Lease Name         State of New Mexico         9. Well No.         3         10. Field and Pool, or Wildcat
LAND OFFICE OPERATOR  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.  OUL GAS WELL OTHER.  A DOIL Company  A Address of Operator F. O. Box 2792, Odessa, Texas  A Location of Well UNIT LETTER C 660 FEET FROM THE North LINE AND 1650 FEET FROM THE 10 S RANCE 32 E NMPM.  I. Elevation (Show whether DF, RT, GR, etc.)  A 217 Gr.  Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	State Fee 5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name <b>State of New Mexico</b> 9. Well No. 3 10. Field and Pool, or Wildcat
OPERATOR         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.         1. OIL SET APPLICATION FOR PERMIT	State Fee 5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name <b>State of New Mexico</b> 9. Well No. 3 10. Field and Pool, or Wildcat
SUNDRY NOTICES AND REPORTS ON WELLS         (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF PLUG BACK TO A DIFFERENT RESERVOIR.         I.         OTHER-         OTHER-         2. Name of Operator         Sun Oil Company         3. Address of Operator         F. O. Box 2792, Odessa, Texas         A. Location of Well         UNIT LETTER C       6600       FEET FROM THE North       LINE AND 1650         THE Mest       LINE, SECTION       26       10 S       RANCE       32 E       NMPM.         IS. Elevation (Show whether DF, RT, GR, etc.)         4.317 Gr.         Check Appropriate Box To Indicate Nature of Notice, Report or Other	5. State Oil & Gas Lease No. 7. Unit Agreement Name 8. Farm or Lease Name <b>State of New Mexico</b> 9. Well No. 3 10. Field and Pool, or Wildcat
OIL       GAS       OTHER-         2. Name of Operator       Sun Oil Company         3. Address of Operator       F. O. Box 2792, Odessa, Texas         4. Location of Well       UNIT LETTER       C         UNIT LETTER       C       660         FEET FROM THE       North       LINE AND         15. Elevation (Show whether DF, RT, GR, etc.)       4.317 Gr.         6.       Check Appropriate Box To Indicate Nature of Notice, Report or Other	7. Unit Agreement Name 8. Farm or Lease Name State of New Mexico 9. Well No. 3 10. Field and Pool, or Wildcat
OIL       GAS       OTHER-         2. Name of Operator       Sun Oil Company         3. Address of Operator       F. O. Box 2792, Odessa, Texas         4. Location of Well       UNIT LETTER       C         UNIT LETTER       C       660         FEET FROM THE       North       LINE AND         15. Elevation (Show whether DF, RT, GR, etc.)       4.317 Gr.         6.       Check Appropriate Box To Indicate Nature of Notice, Report or Other	8. Farm or Lease Name State of New Mexico * 9. Well No. 3 10. Field and Pool, or Wildcat
OIL       GAS       OTHER-         2. Name of Operator       Sun Oil Company         3. Address of Operator       F. O. Box 2792, Odessa, Texas         4. Location of Well       UNIT LETTER       C         UNIT LETTER       C       660         FEET FROM THE       North       LINE AND         15. Elevation (Show whether DF, RT, GR, etc.)       4.317 Gr.         6.       Check Appropriate Box To Indicate Nature of Notice, Report or Other	8. Farm or Lease Name State of New Mexico * 9. Well No. 3 10. Field and Pool, or Wildcat
well       other.         2. Name of Operator       Sun Oil Company         3. Address of Operator       F. O. Box 2792, Odessa, Texas         4. Location of Well       North       1650         UNIT LETTER       C       660       FEET FROM THE       North       1650         THE       West       LINE, SECTION       26       TOWNSHIP       10 S       32 E       NMPM.         15. Elevation (Show whether DF, RT, GR, etc.)         4.317 Gr.       Check Appropriate Box To Indicate Nature of Notice, Report or Other	8. Farm or Lease Name State of New Mexico * 9. Well No. 3 10. Field and Pool, or Wildcat
2. Name of Operator Sun Oil Company 3. Address of Operator F. O. Box 2792, Odessa, Texas 4. Location of Well UNIT LETTER <u>C</u> 660 FEET FROM THE <u>North</u> <u>1650</u> THE <u>West</u> <u>LINE, SECTION</u> <u>26</u> <u>10 S</u> <u>RANGE</u> <u>32 E</u> <u>NMPM.</u> 15. Elevation (Show whether DF, RT, GR, etc.) <u>4.317 Gr.</u> Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	State of New Mexico 9. Well No. 3 10. Field and Pool, or Wildcat
3. Address of Operator         F. 0. Box 2792, Odessa, Texas         A. Location of Well         UNIT LETTER       C       660       FEET FROM THE       North       1650       FEET FROM THE         West       10 S       32 E       NMPM.         TOWNSHIP       10 S       RANCE       32 E       NMPM.         TOWNSHIP       10 S       32 E       NMPM.       Same Same Same Same Same Same Same Same	State of New Mexico 9. Well No. 3 10. Field and Pool, or Wildcat
F. 0. Box 2792, Odessa, Texas         A. Location of Well         UNIT LETTER       C       North       1650         THE       O S       32 E         TOWNSHIP       10 S       32 E       NMPM.         15. Elevation (Show whether DF, RT, GR, etc.)         4.317 Gr.         Check Appropriate Box To Indicate Nature of Notice, Report or Other         NOTICE OF INTENTION TO:	9. Well No. 3 10. Field and Pool, or Wildcat
4. Location of Well UNIT LETTER <u>C</u> <u>660</u> THE <u>North</u> <u>1650</u> TOWNSHIP <u>10 S</u> <u>84 32 E</u> <u>NMPM.</u> 15. Elevation (Show whether DF, RT, GR, etc.) 4317 Gr. Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	3 10. Field and Pool, or Wildcat
UNIT LETTER <u>C</u> 660 <u>FEET FROM THE</u> <u>North</u> <u>1650</u> <u>FEET FROM</u> <u>THE</u> <u>West</u> <u>LINE, SECTION</u> <u>26</u> <u>10 S</u> <u>RANGE</u> <u>32 E</u> <u>NMPM</u> . 15. Elevation (Show whether DF, RT, GR, etc.) <u>4317 Gr.</u> 6. Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	
THE       West       26       10 S       32 E         15. Elevation (Show whether DF, RT, GR, etc.)       4317 Gr.         6.       Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	
THE       West       26       10 S       32 E         TOWNSHIP       15. Elevation (Show whether DF, RT, GR, etc.)       4317 Gr.         6.       Check Appropriate Box To Indicate Nature of Notice, Report or Other NOTICE OF INTENTION TO:	12. County
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Check Appropriate Box To Indicate Nature of Notice, Report or Othe	
Check Appropriate Box To Indicate Nature of Notice, Report or Othe NOTICE OF INTENTION TO:	Lea ()))))))
NOTICE OF INTENTION TO:	
	REPORT OF:
	Ref ort OF:
PLUG AND ABANDON REMEDIAL WORK	
EMPORARILY ABANDON	ALTERING CASING
ULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
other Completion	X
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including es	
radio active NCF-2 charge 4124-26-28-30-35-38-41-43-45-47-49-52-56-59-60 tubing seated 4180. Chemical Engineers treated perforations 4124-4171* dolo-salv w/5 gals. acetic acid/per 1000 gals. dolo-salv. Spotted 4 bb brine washed perfs. in 1/2 bbl. stages every 10 min. Reversed acid. Re Swabbed to pits. Pulled and reran tubing seated at 4210. Ran rods. 24 ending 2-9-65 pumped 66.25 bbls. oil, 2199 bbls. water. GOR 621/1. Gree	with 4000 gals. ls. acid w/122 bbls. aised tubing seat 4063.
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
ROVED BY	DATE 2-10-65
ROVED BY	DATE
RED ON Alling 22 TITLE Area Superintendent	· · · · · · · · · · · · · · · · · · ·
ED_QAQUINISTAArea Superintendent	· · · · · · · · · · · · · · · · · · ·

NO. OF COPIES RECEIVED					
DISTRIBUTION	NEW MEXIC		CONSERVATION COMMISSION		Pres (2.104
SANTA FE			FOR ALLOWABLE		Form C-104 Supersedes Old C-104 and C-1
FILE U.S.G.S.			AND		Effective 1-1-65
LAND OFFICE	AUTHORIZATION	TO TR	ANSPORT OIL AND NATUR	RAL GAS	
TRANSPORTER GAS					
OPERATOR					
PRORATION OFFICE					
Operator Sun Oil Company					
Address					
P. O. Box 2792, Odd	ssa, Texas				
Reason(s) for filing (Check proper			Other (Please explain	1)	
New Weil	Change in Transporter of	:		,	
Recompletion	on L	Dry G	as		
Change in Ownership	Casinghead Gas	Conde	ensate		
If change of ownership give name	a -				
and address of previous owner			······································		
DESCRIPTION OF WELL AN					
DESCRIPTION OF WELL AN Lease Name		Pool No	ame, Including Formation	Kind	of Lease
State of New Mexico	E <b>n</b> 3	Mesca	lero-San Andres Exter	-	
Location					
Unit Letter <b>C</b> ;	660 Feet From The North	·	ne and <b>1650</b> Feet	From The	est
				r tom the	
Line of Section 26 ,	<u> Pewnship</u> 105 Ra	mge 3	2E , NMPM, Let	a	County
DEGICILIZED OF THE LUCE					
DESIGNATION OF TRANSPO		RAL GA	AS Address (Give address to which	approved	
McWood, Corporation			Box 330, Abilene,		of this form is to be sent)
Name of Authorized Transporter of (	Casinghead Gas or Dry Gas		Address (Give address to which	approved com	of this form is to be centl
_			_	approved copy	of this form is to be sent)
If well produces oil or liquids,	Unit Sec. Twp.	Rge.	Is gas actually connected?	When	
give location of tanks.	C 26 10S	32E	No	-	
If this production is comminated.			· · · · · · · · · · · · · · · · · · ·		
If this production is commingled	with that from any other lease o	or popl,	give commingling order number	rt •••••	
COMPLETION DATA	Oil Well Gas	s Well	New Well Workover Deep	en 'Plug H	Rack Same Peaks Full Deale
Designate Type of Comple	tion $-(X)$ X	5 1101.		en Findi	Back   Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		
1-16-65	<b>2-4-65</b>		1 otd1 Depth 4260	P.B.T	.D. 4247
Pool	Name of Producing Formation		Top Oil/Car Pay	Tubin	T Depth
Mescalero-San Andres	Milnesand		4116	-	4210
Perforations 4124, 26, 28,	30, 35, 38, 41, 43,	45.	47, 49, 52, 56, 59, 6	8. Depth	Casing Shoe
& 71 - 1 JS per interv	al.				26 <b>0</b>
	TUBING, CASIN	IG, AN	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SI	ZE	DEPTH SET		SACKS CEMENT
12‡"	8-5/8"		1550'	40	0
7-7/8"	4-1/2"		42601	40	0
7-7/8"	2" EUE		4210'		
TEST DATA AND REQUEST	FOR ALLOWABLE (Test m	ust be a	fter recovery of total volume of loa	d oil and must	be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	Date of Test	r this de	pth or be for full 24 hours) Producing Method (Flow, pump, g		
<b>2-4-65</b> Length of Test	2-8-65 Tubing Pressure		Pump - 2" x 14" Inse Casing Pressure	ert Pump	- 16-38" SPM
24	_		casing ressure	Clicke	
Actual Prod. During Test	Oil-Bbls.		Water-Bols.	Gas - N	
88.24	66 <b>.25</b>		21.99		41.14
			1		
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/MMCF	Gravit	y of Condensate
					-
Testing Method (pitot, back pr.)	Tubing Pressure		Casing Fressure	Choke	Size
		·			
CERTIFICATE OF COMPLIA	NCE		OIL CONSE	RVATION	COMMISSION
				5. <sup>1</sup> .	
hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given		APPROVED			
commission have been complied	with and that the information	Biven belief.	1 Su		·
commission have been complied above is true and complete to t	with and that the information ie best of my knowledge and b	ocnes,	BY		
Commission have been complied above is true and complete to t	with and that the information he best of my knowledge and b	benes.			
commission have been complied above is true and complete to t	with and that the information he best of my knowledge and t				
above is true and complete to t	he best of my knowledge and b				
above is true and complete to t	he best of my knowledge and b		TITLE This form is to be filed If this is a request for a	l in complian allowable for	ce with RULE 1104. a newly drilled or deepened
above is true and complete to the $O-\lambda^{\dagger}$ $O$	ne best of my knowledge and b 		TITLE This form is to be filed If this is a request for a well, this form must be acco	l in complian allowable for ompanied by	ce with RULE 1104. a newly drilled or deepened a tabulation of the deviation
above is true and complete to the complete to	ne best of my knowledge and b 		TITLE This form is to be filed If this is a request for a well, this form must be acco tests taken on the well in a	l in complian allowable for ompanied by accordance w	ce with RULE 1104. a newly drilled or deepened a tabulation of the deviation
above is true and complete to the complete to	ne best of my knowledge and b 		TITLE This form is to be filed If this is a request for a well, this form must be acco tests taken on the well in a	l in complian allowable for ompanied by accordance w n must be fil	ce with RULE 1104. a newly drilled or deepened a tabulation of the deviation ith RULE 111.
above is true and complete to the complete to	ne best of my knowledge and b 		TITLE This form is to be filed If this is a request for a well, this form must be acco tests taken on the well in a All sections of this forr able on new and recomplete Fill out Sections I, II,	l in complian allowable for ompanied by accordance w n must be fil d wells. III, and VI	ce with RULE 1104. a newly drilled or deepened a tabulation of the deviation ith RULE 111. led out completely for allow- only for changes of owner,
above is true and complete to the complete to	ne best of my knowledge and b 		TITLE This form is to be filed If this is a request for a well, this form must be acco tests taken on the well in a All sections of this form able on new and recomplete Fill out Sections I, II, well name or number, or trans	l in complian allowable for ompanied by accordance w n must be fil d wells. III, and VI sporter, or oth	ce with RULE 1104. a newly drilled or deepened a tabulation of the deviation ith RULE 111. led out completely for allow- only for changes of owner,