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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 ☒ Fee ☐

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator J. C. Barnes Oil Company	8. Farm or Lease Name Humble CC State
3. Address of Operator Box 505, Midland, Texas 79701	9. Well No. #5
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 34 TOWNSHIP 10-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat Inbee Permo Penn
15. Elevation (Show whether DF, RT, GR, etc.) UK	12. County Lea

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 ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

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

ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work, SEE RULE 1103.

1. Spotted a 100' plug @ total depth to cover all perforations.
2. Spotted a 100' plug @ stub of 4-1/2" casing, 4,500'.
3. Spotted a 100' plug in and out of base of intermediate casing, 3996'.
4. Spotted a 100' plug @ stub of 7-5/8" casing, 2,000'.
5. Spotted a 50 Sx plug at 1,845', base of surface pipe.
6. Spotted a 10 Sx plug @ top of hole.
7. Hole was loaded w/mud-laden fluids & 4" regulation marker set.

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

HOBBS PIPE & SUPPLY CO.

SIGNED Stanley Sartin TITLE AGENT DATE 1/23/73

APPROVED BY William E. Kegg TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: