NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		
U.S.G.S.		5g. Indicate Type of Lease
LAND OFFICE		State X
OPERATOR		5. State Oil & Gas Lease No.
		9943
(DO NOT USE THIS FORM FOR FUSE "APPLIC	DRY NOTICES AND REPORTS ON WELLS proposals to drill or to deepen or plug back to a different reservoir. Ation for permit -" (form C-101) for such proposals.)	
1.		7. Unit Agreement Name
OIL GAS	OTHER-	-
2. Name of Operator		8. Farm or Lease Name
Cities Service Oil	State AD	
3. Address of Operator		9. Well No.
P.O. Box 69 - Hobbs	, New Mexico	8
4. Location of Well		10. Field and Pool, or Wildcat
J. J	1980 FEET FROM THE South LINE AND 1980 FEET FROM	Mescalero San Andres
UNII LETTER	1700 FEET FROM THE JOUGIN LINE AND FEET FROM	
East	TION 22 TOWNSHIP 105 RANGE 32E NMPM	
THELINE, SEC	TION TOWNSHIP RANGE DOD NMPN	° XIIIIIIIIIIIIIIIIIIIIII
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4340 DF	Lea
16. Check	Appropriate Box To Indicate Nature of Notice, Report or Ot	ther Data
		T REPORT OF:
	SUBSEQUEN	T REFORT OF.
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	ЭТНЕR	
OTHER		
17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, includin,	g estimated date of starting any proposed

The above well was spudded @ 8:30 P.M. on 3-1-65. Ran 50 jts.(1623') 8 5/8" OD 24# casing set @ 1635'. Cemented w/500 sacks 50-50 Poznix + 10% Gel + 18% salt + 200 sacks Incor neat. Plug down @ 10:36 A.M. on 3-3-65. Circulated cement. WOC 24 hrs. Tested 8 5/8" csg. w/1000 psi for 30 min. with no drop in pressure. We are now drilling ahead.

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

SIGNED CALLER COM P	TITLE District Clerk	DATE 3-8-65
APPROVED BY	TTLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	·····	