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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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
E-9943

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 Cities Service Oil Company	8. Farm or Lease Name State AD
3. Address of Operator P. O. Box 69, Hobbs, New Mexico	9. Well No. 10
4. Location of Well UNIT LETTER B 660 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 23 TOWNSHIP 10S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Mescalero San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4327 DF	12. County Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

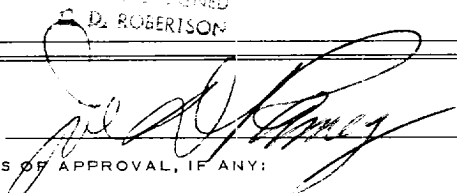
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

It is our intention to perforate and acidize additional Slaughter zone.

Workover procedure will be as follows:

1. Pull rods and tubing.
2. Set BOP and one set blind rams.
3. Perforate 4 1/2" casing w/1 hole per foot at the following depths:
4146', 4147', 4149', 4150', 4151', 4152', 4153', 4155', 4156', 4159',
4160', 4178', 4179', 4181', 4182', 4184', 4186'.
4. Swab test.
5. If top allowable potential is not indicated by swab test, treat w/3000 gallons acid in two stages using rock salt as diverting agent.
6. Return to production.

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

SIGNED D. ROBERTSON	TITLE District Office Manager	DATE May 16, 1969
APPROVED BY 	TITLE SEAL OF DISTRICT OFFICE	DATE
CONDITIONS OF APPROVAL, IF ANY:		