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NEW MEXICO OIL CONSERVATION COMMISSION

SEP 9 11 22 AM '65

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. OG-4303 |

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 Humble Oil & Refining Company | 8. Farm or Lease Name New Mexico State CA |
| 3. Address of Operator Box 2100, Hobbs, New Mexico 88240 | 9. Well No. 1 |
| 4. Location of Well UNIT LETTER D 500 FEET FROM THE North LINE AND 500 FEET FROM THE West LINE, SECTION 35 TOWNSHIP 10-S RANGE 33-E NMPM. | 10. Field and Pool, or Wildcat South Lane Penn. |
| 15. Elevation (Show whether DF, RT, GR, etc.) To be filed later. | 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 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 JOBS <input checked="" 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.

Ran 4067' (126 joints) 8-5/8" casing, 32#, J-55, set at 4088'. Cemented with 1st stage: 900 sxs Incor Posmix with 8% Gel plus 10# salt per sx. Circulated cement for 4 hours. No returns on cement. Cemented with 2nd stage: 600 sxs Incor Posmix with 8% Gel plus 8# salt per sx. POB 12 Midnight, 9-3-65. Cement circulated. WOC 26 hours. Tested casing with 1000# pressure for 30 minutes - no drop in pressure. Drilled plug at 2:15 AM, 9-5-65. Drilling.

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

SIGNED E. L. Harris TITLE Dist. Adm. Supvr. DATE 9-8-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: