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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 31 8 00 AM '65

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.
00-4303

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 Wildcat
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:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spudded 17-1/2" hole at 10:00 AM, 8-27-65. Ran 324' (10 jts.) 13-3/8" casing, 48#, H-40, set at 340'. Cemented with 400 sacks with 4% Gel and 2% Cal. Chlo. POB 2:15 AM, 8-29-65. Cement circulated. WOC 19 hours. Tested casing with 800# pressure for 30 minutes - no drop in pressure. Drilled plug at 9:00 PM, 8-29-65. Drilling.

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

SIGNED [Signature] TITLE **Dist. Adm. Supvr.** DATE **8-30-65**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: