NO. OF COPIES RECEIVED		Form C-103 Supersedes Old
DISTRIBUTION	WENT WENTED ON CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Ellective 1-1-03
FILE	_	5a. Indicate Type of Lease
U.S.G.S.		State Fee 🗶
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		Neme
		mmmm <del>m</del>
SUND (DO NOT USE THIS FORM FOR PEUSE "APPLICA	RY NOTICES AND REPORTS ON WELLS ROPOSALS TO ORILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
i. OIL GAS WELL WELL	OTHER-	None
2. Name of Operator		8. Farm or Lease Name
Amerada Hess Cerperati	Lon	Sallie Ainsworth
3. Address of Operator		9. Well No.
	agton, New Mexico 88260	#1
4. Location of Well	<b>16002)</b> 11011 1101200	10. Field and Pool, or Wildcat
	601 FEET FROM THE North LINE AND 19801 FEE	Jenkins Cisco
UNIT LETTER	FEET FROM THE LINE AND FEE	T FROM
1.1 - <b>-</b> ▲	25 0_9 34_R	
THE West LINE, SECT	TION 25 TOWNSHIP 9-8 RANGE 34-E	_NMPM.
m	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4196° D.P.	Lea
	Appropriate Box To Indicate Nature of Notice, Report INTENTION TO: SUBSEC	or Other Data QUENT REPORT 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	
	OTHER	
OTHER.		
OTHER		
17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, in	icluding estimated date of starting any proposed
Sallie Ainsworth #1 -	Run Cast Iron Plug and set @ 9700° with 35° with Drilling Mud. Cut \$-5/8" Csg. @ 1200° 1230° to 1122°, and 75 sack plug @ 452° to 3	FUE 1986 6) SECT bref a
	Dry Hole Marker in tep of 13-3/8" Csg.	-
	Dry note market in dep el 15-5/0 0040	
	Total to start work on You 6 1972	
	Intend to start work on Nev. 6, 1972	
	, and complete to the best of my knowledge and belief	
18. I hereby certify that the informat	ion above is true and complete to the best of my knowledge and belief.	
18. I hereby certify that the informat		40.00.50
18. I hereby certify that the informat	ion above is true and complete to the best of my knowledge and belief.	DATE 10~30~72
18. I hereby certify that the informat	TITLE Area Superintendent	DATE 10 <b>~30-72</b>
18. I hereby certify that the informat	TITLE Area Superintendent	
18. I hereby certify that the informat	Geologist	DATE 10-30-72
APPROVED BY MY W. CONDITIONS OF APPROVAL, IF A	Lingan TITLE Area Superintendent	