NO. OF COPIES RECEIVED		
	later -	Form C-103
DISTRIBUTION	HUBBS OFFICE O. C. C.	Supersedes Old C-102 and C-103
SANTA FE	NEW MEALOU UL CONSERVATION COMMISSION	Effective 1-1-65
FILE	DEC 13 11 43 AN '66	
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE	-	State X Fee
OPERATOR		5. State Oil & Gas Lease No.
		K 2443
(DO NOT USE THIS FORM FOR PROPO USE "APPLICATION	NOTICES AND REPORTS ON WELLS sals to drill or to deepen or plug back to a different reservoir. I for permit -" (form C-101) for such proposals.)	
OIL GAS WELL WELL	OTHER.	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
3. Address of Operator		LANE STATE
•		9. Well No.
101 North Marien:	feld, Midland, Texas	1-Y
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER M 6	50 FEET FROM THE South LINE AND 760	Wildcat
	30 TOWNSHIP 108 RANGE 34E	
	15. Elevation (Show whether DF, RT, GR, etc.)	
		12. County
$\frac{1}{16}$		Lea
Check Ap	propriate Box To Indicate Nature of Notice, Report or (Other Data
Check Ap NOTICE OF INT	Propriate Box To Indicate Nature of Notice, Report or (ENTION TO: SUBSEQUE	Other Data INT REPORT OF:
Check Ap	SUBSEQUE	Other Data INT REPORT OF:
	PLUG AND ABANDON REMEDIAL WORK	Other Data INT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. CHANGE PLANS CASING TEST AND CEMENT JOB	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	NT REPORT OF:

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.

Drilling was commenced at 2:15 p.m., November 30, 1966.

Surface Casing - Drilled 15" hole to 360'. Set 11-3/4" 42# H-40 casing at 360' and cemented back to surface with 300 sacks regular, 2% CaCl. Plug down 12 Madnight 11-30-66. The pipe was pressure tested to 600 psig 20 hours after cementing was completed. Pressure was held for 30 minutes with no leak-off.

18 I hereby contifue that the					
18. I hereby certify that the	information above	is true and	complete to the	a boot of m.	
		se nue und	comprete to the	e best of m	y knowledge and belief.
					ų – – – – – – – – – – – – – – – – – – –

SIGNED_ W. W. UST	TITLE Dist. Prod. Supt.	DATE12-12-66
APPROVED BY	TITLE	DATE