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HOBBS OFFICE O.C.C.
NEW MEXICO OIL CONSERVATION COMMISSION
MAR 24 12 57 PM '66

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.
MM 981

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	State E Com.
3. Address of Operator	8. Farm or Lease Name
P. O. Box 837, Hobbs, New Mexico	9. Well No.
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER M , 990 FEET FROM THE South LINE AND 990 FEET FROM	Emont Gas
THE West LINE, SECTION 35 TOWNSHIP 20 RANGE 37 NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3584 G.L.	EMA

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 checked="" 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"/>	OTHER <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.

The following work was done on the above well:

- 1. Pressure tested casing to 3000 psi, killed via tubing, and pulled packer.**
- 2. Sand-oil fraced via 5-1/2" casing with 5,040 gallons pad, 30,000 gallons gelled lease oil with 1/20 pound Adomite Mark II, and 60,000 pounds 10-20 sand.**
- 3. Ran tubing and packer. Set packer at 3314' D.F. and tail pipe at 3502' D.F. Swabbed well to kick off.**

Began work 3/14/66 and completed 3/16/66. Prior to workover, flowing 400 MCFPD. After workover, flowing 840 MCFPD.

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

original signed by:

LESTER L. DUKE

SIGNED _____ TITLE **District Superintendent** DATE **3/24/66**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

1968

28th Nov 1968

Dear Sir,

I have the pleasure to inform you that your application for a grant of £10,000 for the purchase of a new motor vehicle for the use of the Department of Health and Social Security has been approved.

The grant will be paid to you in three instalments of £3,333.33 each, subject to the production of receipts for the purchase of the vehicle and the payment of the purchase price.

Yours faithfully,

Director of Health and Social Security

The above information is for your information only and does not constitute an offer of any financial product. It is intended to provide you with a summary of the information which we have received from you and the information which we have used to make a decision on your application.

If you have any queries, please contact the Director of Health and Social Security on 01-234 5678.