NO. OF COPIES RECEIVED	7	Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
v.s.g.s.		5a. Indicate Type of Lease
LAND OFFICE		State X Fee
OPERATOR	<del></del>	5. State Oil & Gas Lease No.
OPERATOR		NM2-A
SUNI (DO NOT USE THIS FORM FOR	DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOI CATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	A. ()
OIL GAS WELL Y	OTHER•	7, Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Texas Pacific Oil Co	mpany, Inc.	State "A" A/c-3
3. Address of Operator		9. Well No.
P. O. Box 4067, Midl	and, Texas 79701	1 1
4 Location of Well		10. Field and Pool, or Wildcat
A A	990 FEET FROM THE NOrth LINE AND 990	Jalmat (Yates-7 Rivers)
	CTION 10 TOWNSHIP 23-S RANGE 36-E	MIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

PLUG AND ABANDON

REMEDIAL WORK

CASING TEST AND CEMENT JOB

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

SUBSEQUENT REPORT OF:

ALTERING CASING

PLUG AND ABANDONMENT

- 1. MIRUPU. Kill well with 9 ppg brine containing 1% KCl and 1 gal. per 1000 gals. Dowell's F-75. Install BOPE.
- 2. Attempt to pull tubing and packer. If unable to pull packer, cut tubing above packer, GIH with overshot, DC's and jars and pull packer.

	GIN WICH OVERSHOW, Do b card goard and part I				
3.	After tubing and packer are out of the hole, GIH with bit, DC's and tubing and clean out to TD @ 3165' using foamed 9 ppg brine containing 1% KCl and 1 gal./1000 gals. F-75.				
4.	Spot 500 gals. 15% acid in the open hole. Acid is to contain 3 gals. J-38, and $25\#$ Z-3.	l gal.	C-16, 1 gal. J	-4A,	
5.	Pull tubing, DC's and bit. Run tubing. NU wellhead.				
6.	Swab well to flow and test.				
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNED	W. J. McClintoch District Operations Sup	pt.	5-24-77		
	Jerry Sexton		WAY 26 1	977	
APPROVE	Dist 1. Supe, TITLE				
CONDITIONS OF APPROVAL, IF ANY:					

2 7 1977

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