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NEW MEXICO OIL CONSERVATION COMMISSION

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.

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 John Yuronka	8. Farm or Lease Name Harrison
3. Address of Operator 102 Petroleum Bldg., Midland, TX 79701	9. Well No. 14
4. Location of Well UNIT LETTER <u>M</u> <u>890</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>24-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Langlie Mattix
15. Elevation (Show whether DF, RT, GR, etc.) 3260' DF	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON

TEMPORARILY ABANDON CHANGE PLANS

PULL OR ALTER CASING

OTHER

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING

COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOBS

OTHER

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 2 P.M. on 1/24/80.

TD 423'. Ran 12 jts. - 410' - of 8-5/8" 23# K-55 S.T.&C. csg. and set at TD. Cemented w/350 sxs. Class "C" cement w/2% CaCl₂. Circulated 75 sxs. 32' of cement left in pipe. Plug down at 12:45 a.m. on 1-25-80. Tested pipe and cement after 18 hrs. w/800# and held O.K. Drilled out cement.

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

SIGNED John Yuronka TITLE Authorized Agent DATE 1-28-80

Jerry Sexton
Dist. 1. Supv.

APPROVED BY _____ TITLE _____ DATE JAN 30 1980

CONDITIONS OF APPROVAL, IF ANY: