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OPERATOR		

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 GAS ☐ WELL OTHER ☐		7. Unit Agreement Name	
2. Name of Operator Astro-Tex Oil Corporation of New Mexico		8. Farm or Lease Name Arthur Cain	
3. Address of Operator Box 1256, Levelland, Texas 79336		9. Well No. 2	
4. Location of Well UNIT LETTER <u>J</u> 1980 FEET FROM THE <u>East</u> LINE AND 1980 FEET FROM THE <u>South</u> LINE, SECTION <u>22</u> TOWNSHIP <u>15 N</u> RANGE <u>33 E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat	
15. Elevation (Show whether DF, RT, GR, etc.) 4140 GR		12. County Harding	

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.

On form C- 103 and date of April 25, 1972 a report was mailed to the oil and gas conservation commission of the operations on this well up to that time, and that we were waiting on orders and Geological information.

When pipe was set on this well (4-1/2 inch) cement was circulated. At the presant time A cap is welded on top of pipe. To re-enter well pipe will have to be cut off under cap.

no plans for later work

Plan to Re-enter Well, disconnected 4/11/72

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

SIGNED Stanley J. Rittle TITLE Vice President DATE 8-2-72

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: