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U.S.G.S.	
LAND OFFICE	
OPERATOR	3

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

RECEIVED

OCT 10 1978

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR APPLICATION TO OIL OR GAS WELL OR WELL BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL OR RE-DRILL FOR OIL OR GAS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER: **ARTESIA. OFFICE**

2. Name of Operator: **Plains Radio Broadcasting Co. ✓**

3. Address of Operator: **221 J. J. White Bldg. Roswell, N.M. 88201**

4. Location of Well
UNIT LETTER **" "** **2310** FEET FROM THE **" "** LINE AND **330** FEET FROM **Blad.**
THE **2310** LINE, SECTION **9** TOWNSHIP **11S** RANGE **23E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3737.73 GL

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
L. A. Ranch 9

9. Well No.
6

10. Field and Pool, or Wildcat
Chisum, S.A.

12. County
Chaves

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	
		OTHER Surface set ☐	

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.

Completed Sept. 28, 1978
10-3-78

Set 3.25 feet used 2 1/2" 4 1/2" casing.

Used 115 sacks Class C, 20 1/2" 10-3-78

Cement did not circulate, filled to surface with ready mix. Let set 24 hrs.

Tested to 500#, no pressure drop. Started drilling operations.

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

SIGNED *Donna Prof* TITLE Secretary DATE 10-5-78

APPROVED BY *W. A. Gessert* TITLE SUPERVISOR, DISTRICT II DATE OCT 11 1978

CONDITIONS OF APPROVAL, IF ANY: