B 0, 07 (07)(0 R(2)(0))	IL CONSER	VALION DIVISION	⊋	
DISTRIBUTION	P. O. :	BOR NEBCEIVI	<u></u>	Form C-103
SANTA PE	SANTA FF N	EW MEXICO 87501		Revised 10-1-78
FILE	1	•	_	
U.S.G.S.	4	SEP 7 197	9	Sa. Indicate Type of Lease
LAND OFFICE	┥	2EL (10)	•	State Fee X
	-{			
OPERATOR	J .	O. C. C.		5, State Oli & Gas Lease No.
		ARTESIA, OFFI	: ET	
STINDS	NOTICES AND DEDODES	ON WELLS		
	RY NOTICES AND REPORTS		f R L O I A	
	HOW FOR PERMIT -" (FORM C-101) FOR	SUCH PROPOSALS.		
1.				7. Unit Agreement Name
WELL X WELL	OTHER-		•)
2. Name of Operator				
2. Name 6. Operator				8. Farm or Lease Name
Ralph Nix				Union Hanner
3, Address of Operator				Union Happy 9. Well No.
D 0 D 61D -				
P. O. Box 61/, Ar	tesia, New Mexico 882	10		1
4. Location of Well				10. Field and Pool, or Wildeat
0 6	60			
UNIT LETTER	60 FEET FROM THE SOUT	hLINE A	FEET FROM	Wildcat SA
East	on 1 TOWNSHIP 8.	-S 20 F		XIIIIIIIIIIIIII
THE LINE, SECTION	ON TOWNSHIP 8	RANGE ZOTE	NMPM.	illillillillillillillil
mmmm	77777			
	15. Elevation (Show when	her DF, RT, GR, etc.)		12. County
	4058	'GL		Chaves
16.				
Check .	Appropriate Box To Indicate	Nature of Notice, I	Report or Oth	er Data
	TENTION TO:		-	REPORT OF:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		`	OBSEQUENT	REFORT OF:
				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING O		PLUG AND ABANDONMENT
~ ₹	Г			THE ARE ABARDONMENT
PULL OR ALTER CABING	CHANGE PLANS	CABING TEST AND CEME	X BOL TH	
		OTHER		
CTHER	[71		
17 Departs a Drawer and or Completed On	perations (Clearly state all pertinent		J.,	estimated date of starting any proposed
work) SEE AULE 1103.	selutions (Crearly state all pertinent	details, and give pertinent	aates, including	estimated date of starting any proposed
Drilled to d	depth of 286'. Rigged	un and ran 6 ioi	nta of 0 E	/OIL WEE C. T. o. C.
20# 20#	topal of 200 . Rigged	ap and ran o jor	iics or o 5,	78" - K55 S T & C -
28# Casing 1	to 256'. Cemented with	1 103 sacks of Cl	ass C with	2% CaCl. Cement
circulated t	to pit. Plug down at 7	7:52 p.m. (8/29/7	9)	
	<u>-</u>	_ , , , , ,	- ,	
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•				
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				•
8. I hereby certify that the information	above is true and complete to the be	st of my knowledge and hel	iel.	
d				
1.01 - 1011				
William I Willer	[4]	Operations Manag	70 °	9/5/79
IGNED 17 FT Million J FALL C	TITLE	Cheractons Manad		URIL
PFR DVED BY				DATE

CONDITIONS OF APPROVAL. F ANY: