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LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

**SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED**  
(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"/>		NOV 19 1979		7. Unit Agreement Name	
2. Name of Operator Ralph Nix		O. C. C.		8. Farm or Lease Name ELIZABETH	
3. Address of Operator P.O. Box 617, Artesia, New Mexico		ARTESIA OFFICE		9. Well No. 1	
4. Location of Well UNIT LETTER D 330 FEET FROM THE North LINE AND 330 FEET FROM West THE LINE, SECTION 7 TOWNSHIP 8-S RANGE 29-E NMPM.				10. Field and Pool, or Wildcat Undesignated SA	
15. Elevation (Show whether DF, RT, GR, etc.) 4049' GL				12. County Chaves	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	

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.

11/13/79 Moved on location

11/14/79 Spudded at 9:30 a.m. Ran 266' of 8 5/8" 23# casing. Cemented with 125 sacks of Class C with 2% CaCl. Circulated to pits, plugged down at 6:30 p.m.

11/15/79 WOC 18 hrs., tested casing to 600#-No leaks.

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

SIGNED William J. Mecca TITLE Operations Manager DATE 11/16/79

APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT V DATE NOV 20 1979

CONDITIONS OF APPROVAL, IF ANY: