

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

APR 21 1980

Form C-103
Revised 10-1-73

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 APPLICATIONS TO DRILL OR TO REOPEN OR PLUG BACK TO A WELL. USE APPLICATION FOR PERMIT TO DRILL FORM C-101 FOR SUCH APPLICATIONS.

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER		2. Name of Operator John P. DiPaolo		3. Address of Operator P. O. Box 342 Roswell, New Mexico 88201		4. Location of well UNIT LETTER H 2310 FEET FROM THE North LINE AND 330 FEET FROM THE East LINE, SECTION 17 TOWNSHIP 10-S RANGE 25-E NMPM.		5. Elevation (Show whether LF, RT, GR, etc.) 3521.9 Gr. 3527 KB		6. County Chaves	
7. Lease Agreement Name		8. Name of Lease Name Cannon - Fee		9. Lease No. 1		10. Field and Pool, or Without West Bitter Lakes EA					

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 ☒	

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.

4-17-80 Total Depth 850' (KBM). Ran 21 joints of 4½", 9.5#, J-55 casing (858.43') and set at 850' (KBM). Cemented with 110 sacks of Class C with 2% calcium chloride. Circulated 25 sacks to pits. Pumped plug down at 2:00 PM on 4-17-80. Held 900 psi on plug for 5 minutes - float held O.K.

Plan to perforate acidize, and sand-water frac well on 4-21-80.

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

SIGNED David E. Harrington TITLE Agent DATE 4-18-80

APPROVED BY W. A. Gussert TITLE SUPERVISOR, DISTRICT II DATE APR 22 1980

CONDITIONS OF APPROVAL, IF ANY: