

OIL CONSERVATION DIVISION

P. O. BOX 2083

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

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U.S.O.S.	
LAND OFFICE	
OPERATION	

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No. LG-6	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEPTH 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 Silman Lake Unit
2. Name of Operator GRYNBERG AND ASSOCIATES		8. Farm or Lease Name Silman Lake Unit
3. Address of Operator 1050 17th Street, Suite 1950, Denver, Colorado 80265		9. Well No. #1
4. Location of Well UNIT LETTER <u>B</u> <u>1980</u> FEET FROM THE <u>East</u> LINE AND <u>660</u> FEET FROM THE <u>North</u> LINE, SECTION <u>8</u> TOWNSHIP <u>10 S</u> RANGE <u>27 E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat Abo
15. Elevation (Show whether DF, RT, GR, etc.)		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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	OTHER ☒ change from gas to oil well

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 1503.

TD 5853

6/23/81 Ran 4½" casing to 2826'. 10½#, K-55. Cemented with 400 sacks class "C" cement 5050 Poz with 2% gel and 6# salt. Top of cement 1250'. No WOC time, no pressure test on casing or BOP. Spotted cement plugs @ 5700' - 5600'; 5000' - 4900'; 2930' - 2830'.

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

SIGNED M. Ettinger M. Ettinger TITLE Exploration Manager DATE 6/25/81APPROVED BY W. A. Gussott TITLE SUPERVISOR, DISTRICT DATE JUL 1 6 1981

CONDITIONS OF APPROVAL, IF ANY: