				RECEIVED BY	1	
NO. OF COPIES RECEIVED						Form C-103 Supersedes Old
DISTRIBUTION	+			ERVAFTER COMMISSION		C-102 and C-103
SANTA FE	V		NEW MEXICO OIL CON	ERVATION COMMISSION	1	Effective 1-1-65
FILE	10	V		O. C. D.	,	
U.S.G.S.			•			5a. Indicate Type of Lease
LAND OFFICE	J.,			AATESIA, OFFICE		State Fee X
OPERATOR	V					5, State Oil & Gas Lease No.
						
(DO NOT USE THIS F	SU Sample Sample	INDR	Y NOTICES AND REPORTS ON POSALS TO DRILL OR TO DEEPEN OR PLUGION FOR PERMIT - " (FORM C-101) FOR SU	WELLS BACK TO A DIFFERENT RESERVOIR. CH PROPOSALS.)		
I. OIL GAS]	OTHER- Dry			7. Unit Agreement Name
2. Name of Operator			21,000			8. Form or Lease Name Plains
TXO Production Corp.						Radio Broadcasting
3. Address of Operator	. 001	- P •				9. Well No.
	. 1	<i>1</i>	and TX 79701			1
900 Wilco Bldg., Midland, TX 79701						10. Field and Pool, or Wildcat
						•
UNIT LETTER M , 660 FEET FROM THE SOUTH LINE AND 330 FEET FROM						Chisum Devonian
THE West LINE, SECTION 18 TOWNSHIP 11-S RANGE 28-E NMPM.						
······································		•		22.00		
	////	////	15. Elevation (Show whethe	r Dr., RT., GR., etc.)	Ì	12. County
<i>ĞШШШ</i>	7777,	7777	3743 GL			Chaves ()
16.	Che	eck .	Appropriate Box To Indicate	Nature of Notice, Report of	r Oth	er Data
NOTI			ITENTION TO:	· .		REPORT OF:
						•
PERFORM REMEDIAL WORK			PLUG AND ABANDON X	REMEDIAL WORK	7	ALTERING CASING
TEMPORARILY ABANDON				COMMENCE DRILLING OPNS.	ī	PLUG AND ABANDONMENT
PULL OR ALTER CASING			CHANGE PLANS	CASING TEST AND CEMENT JOB	1	2
				OTHER		· 🗂
OTHER						
 Describe Proposed or C work) SEE RULE 1103. 	omple	ted Op	erations (Clearly state all pertinent de	tails, and give pertinent dates, incl	luding e	estimated date of starting any proposed
Workly 522 (1522 1115)	.'					
11 3/4" set @	337	CIT	t circ			
8 5/8" set @ 1						
TD 6670'	.023	CII	at CIIC			
10 0070						
Divos Cota						
Plugs Set: 30 s @ 6625						
30 s @ 3450						
35 s. @ 1675 t	-ag					
25 s. @ 375		1	Jr.o.w			
10 s @ surfac	e w	/mar	ker			
16. I hereby certify that the	inform	nation	above is true and complete to the best	of my knowledge and belief.		
		1				
(Inni	n	/	aull, -			2/1//0/
SIGNED	1/0	u	TITLE EN	gineer Assistant		DATE 2/14/84
		1 /	. As	Original Signed By		
V 11)	.11	17)	Man and	Leslie A. Clements		MAD 1 9 100 4
APPROVED BY	LEL	V_{-}	TITLE_	Supervisor District II		DATE MAR 1 2 1984
CONDITIONS OF APPROV	AL, IF	FANY	: <i>(\frac{1}{2}')</i>			
			'/			