

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2083  
SANTA FE, NEW MEXICO 87501

RECEIVED BY

FEB 22 1984

O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-1-78

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

SUNDRY NOTICES AND REPORTS ON WELLS

(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-	7. Unit Agreement Name
2. Name of Operator Maralo, Inc. ✓	8. Farm or Lease Name Pecos "16" State
3. Address of Operator P. O. Box 832, Midland, Texas 79702 0832	9. Well No. 2
4. Location of Well UNIT LETTER K, 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 6-S RANGE 26-E NMPM.	10. Field and Pool, or Wildcat Pecos Slope (Abo)
15. Elevation (Show whether DF, RT, GR, etc.) 3619.7 GR	12. County Chaves

16. 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 checked="" 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.

Spudded 2-13-84 @ 1:30 p.m. - Ran 11 jts. 13 3/8" 54.50#, K-55 casing. Set @ 432'. Cemented casing w/400 sacks Class "C" cement w/1/4# flocele + 2% CaCl<sub>2</sub>. Cement circulated to surface. WOC 8 hours. Tested casing to 1000 psi for 30 minutes - okay. Casing set on 2-16-84.

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

SIGNED Brenda Coffman TITLE Agent DATE 9-17-84

APPROVED BY For Record Only TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: