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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

RECEIVED

SEP 2 1980

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-4321	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- ARTESIA, OFFICE		7. Unit Agreement Name
2. Name of Operator A. NELSON MUNCY <input checked="" type="checkbox"/>		8. Farm or Lease Name ALTO STATE
3. Address of Operator P. O. BOX 1037, ARTESIA, NEW MEXICO 88210		9. Well No. 2
4. Location of Well UNIT LETTER J 1650 FEET FROM THE SOUTH LIVE AND 1650 FEET FROM EAST THE LINE, SECTION 1 TOWNSHIP 15S RANGE 29E NMPM.		10. Field and Pool, or Wildcat UND.DOUBLE-L QN. ASSOC.
15. Elevation (Show whether DF, RT, GR, etc.) 3865 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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input 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 1703.

8/1/80 PERF. 8-holes (2-shots/foot) 1951-55' (OIL ZONE)

FRAC. 12,600 gals. QUEEN OIL (22,000 # sand -- 500 gal. acid.)

NOTE: GAS ZONE 1942-45' NOT PERF. AS PREVIOUSLY INDICATED

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

SIGNED <u>Wilma Privette</u>	TITLE <u>Secretary</u>	DATE <u>9/1/80</u>
APPROVED BY <u>W.A. Gussitt</u>	TITLE <u>SUPERVISOR, DISTRICT II</u>	DATE <u>SEP 4 - 1980</u>
CONDITIONS OF APPROVAL, IF ANY:		