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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.  
Fed. NM-01510

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR OPERATIONS TO BE LIFTED OR TO OIL OR GAS LOTS IN A DIFFERENT RESERVOIR.  
USE MODIFICATION FOR REPORT ON OIL OR GAS LOTS FOR SUCH OPERATIONS.)

1. OIL WELL  GAS WELL  OTHER

2. Name of Operator  
Collier & Collier ✓

3. Address of Operator  
P.O. Box 798, Artesia, New Mexico 88210

4. Location of Well  
UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM  
THE West LINE, SECTION 23 TOWNSHIP 17S RANGE 28E NMPM.

7. Unit Agreement Date

8. Name of Lease Name  
Malco

9. Well No.  
#1

10. Field and Pool, or Without  
Red Lake Q-G SA

12. County  
Eddy

15. Elevation (Show whether DF, KT, CR, etc.)

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"/>	REMEDIATION WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <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 checked="" 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 1103.

Bradenhead leak survey.  
Conventional bradenhead. Pipe to surface.

RECEIVED  
MAY 7 1979  
O. C. C.  
ARTESIA OFFICE

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

SIGNED C. Lee Mark TITLE Secretary DATE 4/23/79

APPROVED BY B. W. Weaver TITLE OIL AND GAS INSPECTOR DATE 4/23/79

CONDITIONS OF APPROVAL, IF ANY: