	* com		
N' . OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTAFE	NEW MEXICO OIL CONSERVATION COMMISSION		Effective 1-1-65
FILE			
u.s.g.s.		RECEIVED	5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR /		5 m A 4 4 40 TA	5. State Oil & Gas Lease No.
		DEC 1.4 1978	State 647
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSALS TO USE "APPLICATION FOR PER	ES AND REPORTS ON	WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO USE **APPLICATION FOR PER	MIT - " (FORM C-101) FOR SUC	H PROPOSALS.)	
I. OIL GAS		ARTESIA, OFFICE	7. Unit Agreement Name
WELL X OTHER-			Artesia Unit
2. Name of Operator			8. Farm of Lease Name
DEPCO, Inc. V			0.18-11 No
3. Address of Operator			9. Well No.
800 Central, Odessa, Texas 79761			1
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER L , 1650	FEET FROM THE South	LINE AND 460 FEET FROM	Artesia (Q., G., SA)
THE West LINE, SECTION 26	township 17S	RANGE 28E NMPM	
	15. Elevation (Show whether	DF, RI, GR, etc.)	12. County
	3671 KB		
Check Appropri	ate Box To Indicate N	Nature of Notice, Report or Ot	her Data
NOTICE OF INTENTIO	N TO:	SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		отнея <u>Bradenhead</u>	Inspection X
OTHER			
17. Describe Proposed or Completed Operations (Clearly state all pertinent des	rails and give pertinent dates, including	e estimated date of starting any proposed
work) SEE RULE 1103.	cieurty state air pertinent aei	and give pertinent acree, metalling	,
This well was dug out bradenhead to surface		and connections with va	alves from the
Inspected and approved by Mr. B. W. Weaver 11-20-78.			
18. I hereby certify that the information above is	true and complete to the best	of my knowledge and belief.	
~ XXX /			
SIGNED XXV MESON D. R. M	lason TITLE Ch	ief Clerk	DATE 12-12-78
./ ,			~ 4050
APPROVED BY MR. William	TITLE 0	IL AND GAS INSPECTOR	DEC 1 8 1978
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CONDITIONS OF APPROVAL, IF ANY