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NO. OF COPIES REC		· · · · · · · · · · · · · · · · · · ·	Form C-103
DISTRIBUTIO			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVAT		Effective 1-1-65
U.S.G.S.		977	
LAND OFFICE	·	5, 7	5a. Indicate Type of Lease
OPERATOR			State X Fee
	ARTESIA, OFI	e Firse	5. State Oil & Gas Lease No.
			B-161-3
(DO NOT USE	SUNDRY NOTICES AND REPORTS ON WELL THIS FORM FOP PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPO	DIFFERENT RESERVOIR.	
1 · ·		>ALS.)	7. Unit Agreement Name
OIL WELL	GAS WELL OTHER- TO CONVERT TO W.	Τ.Ψ.	
2. Name of Operator	/		8. Farm or Lease Name
	RATING COMPANY		Brinson State
3. Address of Opera			9. Well No.
Petroleu	m Building -Tower Suite, Roswell,	NM 88201	1 .2
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER	A 330 FEET FROM THE N	990	Gbr, Jackson, Qn/i SA
тне	LINE, SECTION 36 TOWNSHIP	ANGE 31E NMPM.	AHHHHHHHHH
mmmm			<u> </u>
	15. Elevation (Show whether DF, RT)	, GR, etc.)	12. County
	4165 G.L.		Eddy
	Check Appropriate Box To Indicate Nature	of Notice, Report or Oth	ier Data
	NOTICE OF INTENTION TO:		REPORT OF:
PERFORM REMEDIAL	ORK A PLUG AND ABANDON REMED	AL WORK	ALTERING CASING
TEMPORARILY ABAND	N СОММЕ	INCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASH	G CHANGE PLANS CASING	TEST AND CEMENT JOB	
	OTH	ER	
OTHER			
17. Describe Propos	d or Completed Operations (Clearly state all pertinent details, and 1 to 3.	give pertinent dates, including	estimated date of statting any proposed
work) SEE RUL	. 1 f03.		soundied date of starting any proposed
PURPOSE:	To convert to Water Injection We	ll. as per Order	No. 8-5318
	Work to commence on approval.	ii, us per stati	NO. N 5510.
1.	Run Gamma-Ray-Coorelation Log to	T.D.	
2.	Perforate Premier from 3855-3885		t.
3. Run 4 1/2" Guiberson Uni-One (Tension) packer, internally plastic			
coated tubing and set @ approximately 3800'.			
4. Load annulus with inert fluid, pressure test and equip for			
detection of any annular leaks,			
5.	Treat or acidize (if necessary).		
6,	Place on injection.		
18. I hereby certify t	at the information above is true and complete to the best of my kno	wledge and belief.	
		- or one convit	
	M.Ken One	ator	
SIGNED C			DATE 2/18/77
, ,			
1	a Lipsott	VISOR, DISTRICT, H	FEB 241977
APPROVED BY		, won, DISTRICT H	DATE
CONDITIONS OF AF	PROVAL, IF ANY:		