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NEW MEXICO OIL CONSERVATION COMMISSION  
O. E. C.  
ARTESIA, OFFICE

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.  
OG-267

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- 2. Name of Operator Mark Production Company 3. Address of Operator 1108 Simons Building, Dallas, Texas 75201 4. Location of Well UNIT LETTER N 660 FEET FROM THE S LINE AND 1,980 FEET FROM THE W LINE, SECTION 4 TOWNSHIP 17S RANGE 28E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.)	7. Unit Agreement Name 8. Farm or Lease Name Atlantic-State 9. Well No. 1 10. Field and Pool, or Wildcat Vandergriff Keyes Queen 12. County Eddy
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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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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 1103.

Well plugged May 31, 1969 as follows:

Left casing in well bore  
Spotted 40 sx cmt over perforations w/pump  
Spotted 10-sx cmt plug in top  
Placed marker on top

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

SIGNED Will M. Heflin TITLE Ass't Secretary DATE 6/13/69

APPROVED BY [Signature] TITLE SECRETARY DATE SEP 2 1969

CONDITIONS OF APPROVAL, IF ANY: