NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE /_		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State XX Fee
OPERATOR 4		5. State Oil & Gas Lease No.
-		647
SUNDR	Y NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ON FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
	ON FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL GAS WELL WELL		7. Unit Agreement Name
2. Name of Operator	OTHER-	8, Farm or Lease Name
•		8. 1 drill of Ledse Nume
Hugh L. Johnston 3. Address of Operator	i, Sr.	Five-J 9. Well No.
· ·	4134m Persoll New Mordes 88201	s. Well No.
4. Location of Well	ilding - Roswell, New Mexico 88201	10. Field and Pool, or Wildcat
	200	Zintes.
UNIT LETTERO,	330 FEET FROM THE South LINE AND 1650 FEET FROM	Artesia
7 7 .	AF 13a 00m	
THE LAST LINE, SECTION	N 25 TOWNSHIP 17S RANGE 28E NMPM.	
	15, Elevation (Show whether DF, RT, GR, etc.)	12. County
	3692' GR	
16.		Eddy (\\\\\\\
	Appropriate Box To Indicate Nature of Notice, Report or Otl	
NOTICE OF IN	TENTION TO: SUBSEQUENT	FREPORT 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	
	OTHER	
OTHER		
17. Describe Proposed or Completed Op	erations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1103.		
This are	all wer anudded on April 15 1965	
IUTS M	ell was spudded on April 15, 1965.	
Dud 11a	i to a depth of 450' - Ran 8 5/8" OD - 20 lb. H-	AO Casina
DITTIE	1 to a depth of 450 - Ran o 5/0 ob 20 151 h	TO CASTING,
eat st	450'. Cemented with 50 sacks of cement - W.O.C	. 24 hours.
20 Ca		,, 24 200201
hatseT	casing with 600 lbs pressure Tested	10. K.
20000		
		EIVED
	REC	EIVED
	REC	
	R E C	EIVED Y 1 4 1965
	MA'	EIVED Y 1 4 1965 J. D. G.
	MA'	EIVED Y 1 4 1965
	MA' ARTE	EIVED Y 1 4 1965 J. D. G.
18. I hereby certify that the information	MA'	EIVED Y 1 4 1965 J. D. G.
	MA' ARTS above is true and complete to the best of my knowledge and belief.	EIVED Y 1 4 1965 J. C. C. SIA, OFFICE
	MA' ARTE	EIVED Y 1 4 1965 J. D. G.
	MA' ARTS above is true and complete to the best of my knowledge and belief.	EIVED Y 1 4 1965 D. C. SEIA, OFFICE
	MA' ARTE above is true and complete to the best of my knowledge and belief. Accountant TITLE Accountant	EIVED Y 1 4 1965 D. C. SIA, OFFICE DATE 5-12-65
	MA' ARTS above is true and complete to the best of my knowledge and belief.	EIVED Y 1 4 1965 D. C. SEIA, OFFICE