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RECEIVED
NEW MEXICO OIL CONSERVATION COMMISSION

JAN 29 1979

O. C. C.
ARTESIA, OFFICE

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

SUNDARY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR APPLICATIONS TO OIL AND GAS CONSERVATION COMMISSION FOR A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO PRODUCE OIL OR GAS FROM A DIFFERENT RESERVOIR.

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator B.N. C.E. LaRue and Muncy Jr. ✓

3. Address of Operator
P.O. Box 196 Artesia, N.M. 88210

4. Location of Well
UNIT LETTER M 990 FEET FROM THE south LINE AND 330 FEET FROM THE west LINE, SECTION 27 TOWNSHIP 17 S RANGE 28 E NMPL.

5. Elevation (Show whether DF, RT, GR, etc.)
3680 gl

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State (C-103) Lease No.
B 8814

7. Unit Agreement Name

8. Name of Lease Holder
STATE B

9. Well No.
2

10. Field and Pool, or Valued
Empire Y SR

12. County
Eddy

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER <u>plumbing for casing leak survey</u> ☒	

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.

Installed necessary plumbing for casing leak survey.
Two inch was plumbed to surface with a braiding head connection consisting of a 2000# valve.
At or above surface a one inch swage was connected to a one inch 2000# valve.
No BH 1 String Csg

Inspected and approved by Williams and Weaver 1-25-79

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

SIGNED [Signature] TITLE prod. foreman DATE 1-25-79

APPROVED BY [Signature] TITLE OIL AND GAS INSPECTOR DATE JAN 30 1979

CONDITIONS OF APPROVAL, IF ANY: