STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT OIL CONSERVATION DINESERVED	
DISTRIBUTION P. O. BOX 2088	Form C-103
SANTA FE SANTA FE, NEW MEXICO 87501	Revised 10-1-78
SANTA FE SANTA FE, NEW MEXICO 87501	5a. Indicate Type of Lease
U.S.C.S.	State Fee X
O. C. D.	5. State Oil & Gas Lease No.
ARTESIA, OFFICE	
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-1011) FOR SUCH, PROPOSALS.)	
1.	7, Unit Agreement Name
OIL A GAB OTHER-	
2. Name of Operator	8. Farm or Lease Name
Maurice Hobson 🗸	WOLF
3. Address of Operator	9. Well No.
P. O. Drawer 638, Alamogordo, New Mexico 88310	#4
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTERM 990 FEET FROM THE SOUTH LINE AND 990 FEET FROM	East Empire Yates 7-R
THE West LINE, SECTION 23 TOWNSHIP 175 RANGE 28E NMPH.	
15. Elevation (Show whether DF, RT, GR, etc.) 3598.4 GL	12. County Eddy
16. Check Appropriate Box To Indicate Nature of Notice, Report or Oth	er Data
NOTICE OF INTENTION TO: SUBSEQUENT	
PERFORM REMEDIAL WORK	ALTERING CASING
TEMPORAAILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	in of a drilling
OTHER Unange on ownersh	ip of a drilling well X
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including e work) SEE RULE 1903.	stimated date of starting any proposed

Effective 6/1/80 the ownership of the Wolf #4 will be changed from Collier & Collier, P. O. Box 798, Artesia, New Mexico 88210, to Maurice Hobson, P. O. Drawer 638, Alamogordo, New Mexico 88310. Casing has been run and this well has been cemented to surface. Maurice Hobson, as operator, will be responsible for the completion of the well and all subsequent reports.

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

Rhonda Parrich	Agent	DATE	6-2-80
APPROVED BY W. a. A casset	SUPERVISOR, DISTRICT H	DATE	JUN 4 1980

CONDITIONS OF APPROVAL, IF ANYI