1). OF COPIES RECEIVED					Form C-103 Supersedes Old	7
DISTRIBUTION		6865			C-102 and C-10	
SANTA FE	NEW ME	EXICO OIL CONST	RVATION COMMISSI	ON	Effective 1-1-65	5
FILE		0.0			F- 1-41 7	- I - and
u.s.g.s.		$-007~{ m My}$ $ ilde{}$. 4 (%)		5a. Indicate Type o	
LAND OFFICE		•			State K	Fee
OPERATOR					5. State Oil & Gas	Legse No.
		46185.			LG-6973	mmm
SL (DO NOT USE THIS FORM F	INDRY NOTICES AND OR PROPOSALS TO DRILL OR T	REPORTS ON TO DEEPEN OF PLUG BOOM C-101) FOR SUC	WELLS ICK TO A DIFFERENT RESE PROPOSALS.)	RVOIR.		
1.	7		,		7. Unit Agreement	Name
OIL GAS WELL	OTHER-					
2. Name of Operator			•		8. Farm or Lease	
Husky Oil Compa	any of Help	シガス・			SRC Stat	<u>ce</u>
3. Address of Operator					9. Well No.	
600 So. Cherry	St., Denver,	Colorado 8	0222		1	
4. Location of Well				11.00	10. Field and Poo	
UNIT LETTER B	660	North	1980	ESET FROM	Diamond Mo	ound, Atoka
UNIT LETTER	FEET FROM	M THE	LINE AND	PEET FROM	MITTELLIN	
THE East LINE.	SECTION	TOWNSHIP 165	RANGE 27E	NMPM.		
immmmm	15. Eleve	ation (Show whether	DF, RT, GR, etc.)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12. County	MITTI
	////////	7.2' GR			Eddy	
16. CL	777777777		Notice D	anare or Orl		
	eck Appropriate Box OF INTENTION TO:	t to indicate N			REPORT OF:	•
·		. —		(7		
PERFORM REMEDIAL WORK	PLU	IG AND ABANDON	REMEDIAL WORK	H		ING CASING
TEMPORARILY ABANDON	•		COMMENCE DRILLING OF	NS.	PLUG A	ND ABANDONMENT
PULL OR ALTER CASING	СНА	INGE PLANS	CASING TEST AND CEME	EDL TH		_
			OTHER	,		
OTHER Ran produ	ction casing	لعا ــــــــــــــــــــــــــــــــــــ				
17. Describe Proposed or Compl		na all postinant dat	ile and sive pertinent	datas includina	estimated date of	starting any propose
17. Describe Proposed or Complework) SEE RULE 1103.	eted Operations (Clearly St	ate att pertinent aei	itis, and give pertinent	dates, the tables		, , , , , , , , , , , , , , , , , , ,
worky san noun vivi						
Ran 266 jts 4½	", 11.6#, N-80), LT&C cas	sing (8796.68	3').		
Set @ 8765'.	Cemented as fo	ollows:				
1st Stage -	w/1000 gal. m	nud flush,	450 sx Class	s "H" w/5	5# KCL/sk	
	+ 1% CF-9 Flu	aid Loss.	Plug down @	12:30 A	M = 10/24/80	•
2nd Stage -	w/500 gal. mu	ad flush, 2	200 sx Pacese	etter Lig	jht + 8%	
	salt + 10 pps	s Gilsonite	+ 1/4 pps (Cellosea	Ĺ,	,
•	followed w/50) sx "G" +	8% salt + 10) pps Gi	lsonite.	
CIP @ 2:30 AM,						
011 (1101 1111)	,, -					
			•			
			•			
				•		
					•	
18. I hereby certify that the info	ormation above is true and	complete to the best	of my knowledge and be	lief.		# No 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
\wedge						
JOHNER M	. Statusions	TITLE	Engineering A	Aide	DATE OCT	. 28,1980
SIGNED 17:33:33.43.1						
	~					
		*****			DATE	
APPROVED BY		TITLE			JA, E	

CONDITIONS OF APPROVAL, IF ANY: