NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	NEW HENICO OIL CONCERNATION COMMISSION	Supersedes Old C-102 and C-103
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State X Fee
OPERATOR /		5. State Oil & Gas Lease No.
7		B-936
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.)		
USE **APPLICATION FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.)		
OIL GAS WELL WELL		7. Unit Agreement Name
2. Name of Operator	OTHER-	8. Farm or Lease Name
Harlan Production Company		Etz-State
3. Address of Operator		9. Well No.
P. O. Box 355, Mon.	ahans, Texas	
4. Location of well		10. Field and Pool, or Wildcat
UNIT LETTERK, 23	10 FEET FROM THE South LINE AND 1770 FEET F	FROM Grayburg Jackson
THE West LINE, SECTION _		MPM. (())
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3675 Gr.	Eddy
Check App	propriate Box To Indicate Nature of Notice, Report or	
NOTICE OF INTE		ENT REPORT 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 JQB X	_
	OTHER	
OTHER		
7. Describe Proposed or Completed Opera work) SEE RULE 1103.	tions (Clearly state all pertinent details, and give pertinent dates, inclu-	ding estimated date of starting any proposed
,		
one (1) hour before Fractured open hole 9000# sand.	e drilling ahead. Cable tool total depth 20 e section from 2058 to 2093 with 8,100 Ga	093', November 21, 1965. 1. lease oil and
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		NOV 29 1365
		g The Control Prof. The State Control
		TOTALIST AND
8. I hereby certify that the information abo	ove is true and complete to the best of my knowledge and belief.	
IGNED A CULLI	uu l	
IGNED 19 COULT	Petroleum Engineer	November 24, 1965
man -		10 A14 D = 4 4 A A
PPROVED BY MILLIZIVIST	TITLE OF BEE BUR HISPERIA	MOV 2 = 1965
ONDITIONS OF APPROVAL, IF ANY:	The state of the s	DATE
militarine, il multi		