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NEW MEXICO OIL CONSERVATION COMMISSION **RECEIVED**

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

JAN 16 1975

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

**O. C. C.**

**SUNDRY NOTICES AND REPORTS ON WELLS ARTESIA, OFFICE**  
(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>H &amp; S Oil Company</b>	8. Farm or Lease Name <b>Pedell</b>
3. Address of Operator <b>216 American Home Bldg Artesia, N.M. 88210</b>	9. Well No. <b>3</b>
4. Location of Well UNIT LETTER <b>A</b> <b>990</b> FEET FROM THE <b>North</b> LINE AND <b>990</b> FEET FROM THE <b>East</b> LINE, SECTION <b>35</b> TOWNSHIP <b>18S</b> RANGE <b>26E</b> NMPM.	10. Field and Pool, or Wildcat <b>Dayton S A</b>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <b>Eddy</b>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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 1705.

**To be put on production**

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

SIGNED *[Signature]* TITLE **Partner**

DATE **1-14-75**

APPROVED BY *[Signature]* TITLE **SUPERVISOR, DISTRICT II**

DATE **JAN 21 1975**

CONDITIONS OF APPROVAL, IF ANY:

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# NEW MEXICO OIL CONSERVATION COMMISSION

Form O-103  
Supersedes O-102  
Effective 1-1-59

1. Name of Operator <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		2. Address of Operator	
3. Location of Well		4. Field and Pool, or Well No.	
5. Township, Range, and Section		6. Feet from the _____ and _____	
7. Elevation (State whether ON, AT, OR, NEAR)		8. County	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
 NOTICE OF INTENTION TO:  
 SUBSEQUENT REPORT OF:

<input type="checkbox"/> PERFORM OPERATING WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PUMP OR WATER CASING <input type="checkbox"/> OTHER	<input type="checkbox"/> REPAIR AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER	<input type="checkbox"/> REMEDIATE WORK <input type="checkbox"/> COMMENCE DRILLING OPERATIONS <input type="checkbox"/> CASING PLANT AND CEMENT JOBS <input type="checkbox"/> OTHER	<input type="checkbox"/> ABANDON CASING <input type="checkbox"/> PUMP AND ABANDONMENT <input type="checkbox"/> OTHER
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17. Operator's proposed or intended operations (Specify date of permit details, and also pertinent areas, including estimated date of start, are proposed.)

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

SIGNED	TITLE	DATE
APPROVED BY	TITLE	DATE

CONDITIONS OF APPROVAL, IF ANY: