

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-103
Revised 10-1-

SEP 10 '87

O. C. D.

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-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Free <input type="checkbox"/>
2. Name of Operator MURPHY OPERATING CORPORATION	5. State Oil & Gas Lease No. E-1287-3
3. Address of Operator P. O. Box 2648, Roswell, New Mexico 88202-2648	7. Unit Agreement Name
4. Location of Well UNIT LETTER M 990 FEET FROM THE South LINE AND 660 FEET FROM THE West LIKE, SECTION 14 TOWNSHIP 18 South RANGE 28 East NMPM.	8. Farm or Lease Name State "C"
	9. Well No. 9
	10. Field and Pool, or Wildcat Artesia Qn. Grybrg. S/A
15. Elevation (Show whether DF, RT, GR, etc.) 3576'	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 <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER returned well to production <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

The subject well has been returned to production. The status of this well has changed from shut-in to producing.

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

SIGNED <u>Lois N. Brown</u>	TITLE <u>Production Clerk</u>	DATE <u>Sept. 4, 1987</u>
APPROVED BY <u>Lois A. Clements</u>	TITLE <u>Supervisor District II</u>	DATE <u>SEP 10 1987</u>