

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.
30-015-01912

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
647

7. Lease Name or Unit Agreement Name:
Welch State

8. Well No. **#5**

9. Pool name or Wildcat
ARTESIA-G-GR-SA

4. Well Location
Unit Letter **J** : **1570** feet from the **South** line and **2390** feet from the **East** line
Section **17** Township **18 S** Range **28 East** NMPM County **Eddy**

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

11. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

**Ran 1800' Rods, tubing + pump.
this well is pumping**



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

SIGNATURE **Harold D. Parrish** TITLE **Owner** DATE **1-19-01**

Type or print name **Harold D. Parrish** Telephone No. **505 746-6156**

(This space for State use)

APPROVED BY **Miss Stillfield** TITLE **Field Rep. II** DATE **1/31/2001**
Conditions of approval, if any: