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OCT 31 1969

NEW MEXICO OIL CONSERVATION COMMISSION

O. C. C.
ARTEZIA, OFFICE

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

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-11399	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Cities Service Oil Company ✓		8. Farm or Lease Name State BV
3. Address of Operator Box 69 Hobbs, New Mexico 88240		9. Well No. 7
4. Location of Well UNIT LETTER 0, 660 FEET FROM THE South LINE AND 1650 FEET FROM THE East LINE, SECTION 19 TOWNSHIP 18s RANGE 28E N.M.P.M.		10. Field and Pool, or Wildcat Artesia (Q.G.S.A.)
15. Elevation (Show whether DF, RT, GR, etc.) 3575 GR		12. County Eddy

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Shut In

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 above well was shut in on 9-30-69. This well is uneconomical to produce due to low oil production. Please cancel the allowable effective 12-1-69.

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

SIGNED ORIGINAL SIGNED TITLE District Admin. Supervisor DATE 10-29-69

APPROVED BY W. A. Gressett TITLE OIL AND GAS INSPECTOR DATE OCT 31 1969

CONDITIONS OF APPROVAL, IF ANY: