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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Supersedes Oil
C-102 and C-103
Effective 10-65

3d. Indicate type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	647

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"/>	7. Unit Agreement Name
2. Name of Operator Petroleum Corporation of Texas	8. Firm or Lease Name Royal Duke State
3. Address of Operator Drawer B, Artesia, New Mexico	9. Well No. 1
4. Location of Well Footage not available LINE, SECTION 29 TOWNSHIP 18S RANGE 28E NMPM.	10. Field and Sub, or Wildcat Artesia
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Bddy

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 checked="" 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"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <input type="checkbox"/>	

16. 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.

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1. Pump 25 sack cement plug to TD 2040'.
2. Pressure test plug.
3. Cut off and pull recoverable casing.
4. Load hole with 10# mud.
5. Spot 25 sack cement plug at bottom of surface casing with 2" tubing.
6. Put 5 sack cement plug and pipe marker in top of surface pipe.

JAN 31 1966

D. C. C.
ARTESIA, OFFICE

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

SIGNED James H. Armstrong TITLE Dist. Superintendent DATE 1-28-66

APPROVED BY ML Armstrong TITLE Assistant Superintendent DATE JAN 31 1966
CONDITIONS OF APPROVAL, IF ANY: