NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE /	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE / L	-	•
U.S.G.S.	RECEIVED.	5a. Indicate Type of Lease
LAND OFFICE	TOLIVED,	State X Fee
OPERATOR		5. State Oil & Gas Lease No.
	DEC 4 1975	B-11594
SUNDF	RY NOTICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
USE "APPLICAT	TION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS WELL WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator	CTION COMPANY ~	8. Farm or Lease Name
3. Address of Operator BOX 367	STION COMITAINT	State FX
	AC 70714	9. Well No.
ANDRE IS, TEX	AS 79714	, ,
——————————————————————————————————————	874 FEET FROM THE West LINE AND 1874 FEET FROM	10. Field and Pool, or Wildcat ARTESIA , QGSA
ONIT LETTER,	LINE AND FEET FROM	
THE NORTH LINE, SECTI	on 6 TOWNSHIP 18-5 RANGE 28-E NMPM.	
cinc, see i	ON TOWNSHIP 18 PANGE 20 L NMPM.	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3645 G L	Edd
Check	Appropriate Box To Indicate Nature of Notice, Report or Oth	er Data
NOTICE OF I	(TEXISTO)	REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER WELL	Status
OTHER		
17. Describe Proposed or Completed Or	perations (Clearly state all pertinent details, and give pertinent dates, including	
work) SEE RULE 1103.	to the state an portion details, and give pertinent dates, including	estimated date of starting any propose
D .	Λ	٨.
Reservoir s	evaluations are presently being	ra made.
	, 0	\mathcal{C}
Outinote us		, 00 U
unnerpare see	ionmendations disposition	will be
Λ'.	commendations : disposition	_
made during	a 1976	
D:	\mathcal{H}	
The woll	Number 10 F . U	. 0 4
	acquirem when acq	much lim
E. 00. 0	Powas shut in when acquiton : Fair due.	1 7
marken, us	lon i Fair dire.	V
•		
\sim		
	above is true and complete to the best of my knowledge and belief.	
8. I hereby tertify/that the information	above is true and complete to the best of my knowledge and belief.	
La Illin	Www. Title ADMINISTRATIVE ASSISTANT	0 4078
SIGNED NUMBER	MONTY TITLE ADMINISTRATIVE ASSISTANT	nfn 3 19/5

SUPERVISOR, DISTRICT II

DEC

DATE ___

4 1975

OVE NMOCC. AT JULY LINESSEED TITLE APPROVED BY JULY LINESSEED TITLE CONDITIONS OF APPROVAL, IF ANY EXPENSED 10-1-76