

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	/
FILE	/
U.S.G.S.	
LAND OFFICE	
OPERATOR	/

NEW MEXICO OIL CONSERVATION COMMISSION

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

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

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator <b>Len Mayer</b>		8. Farm or Lease Name <b>Costa Plente Gas Com</b>
3. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>		9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>A</b> , <b>990</b> FEET FROM THE <b>North</b> LINE AND <b>990</b> FEET FROM THE <b>East</b> LINE, SECTION <b>32</b> TOWNSHIP <b>18 S</b> RANGE <b>26 E</b> NMPM.		10. Field and Pool, or Wildcat <b>Undes Atoka Penn Gas</b>
15. Elevation (Show whether DF, RT, GR, etc.)		12. County <b>Eddy</b>

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 JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <b>Deepening</b> <input checked="" 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.

**7/18/68 Drilled 11' new hole, total depth 9185.  
Swabbed in, produced gas at approximate rate of  
3000 MCF per day. Declined to 100% water in 2 days.**

RECEIVED

FEB 5 1969

O. C. C.  
ARTEBIA, OFFICE

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

SIGNED <b>H. L. Smith</b>	TITLE <b>Agent</b>	DATE <b>1/30/69</b>
APPROVED BY <b>W. A. Gressett</b>	TITLE <b>OIL AND GAS INSPECTOR</b>	DATE <b>FEB 5 1969</b>
CONDITIONS OF APPROVAL, IF ANY:		