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# 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 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well  | 7. Unit Agreement Name                    |
| 2. Name of Operator<br>Ryder Scott Management Company   | 8. Farm or Lease Name<br>Rotary State     |
| 3. Address of Operator<br>922 - 8th Street, Wichita Falls, Texas 76301  | 9. Well No.<br>7                          |
| 4. Location of Well<br>UNIT LETTER J, 2650 FEET FROM THE North LINE AND 2650 FEET FROM THE West LINE, SECTION 20 TOWNSHIP 18S RANGE 28E NMPM. | 10. Field and Pool, or Wildcat<br>Artesia |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3589 GL  | 12. County<br>Eddy                        |

### 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 JOB <input checked="" type="checkbox"/> | OTHER <input 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.

12/12/67 Ran 529' 24# 8-5/8" casing. Cemented with 240 sax. 2% CaCl. Cement circulated. WOC 18 hrs. Test 600# for 30 min. O.K.

12/17/67 Ran 2450' 9.5# 4-1/2" casing. Cemented with 225 sax. WOC 18 hrs. Test 1500# for 30 min. O.K.

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

SIGNED

TITLE Ass't. Prod. Supt.

DATE 1/19/68

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: