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NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 03 1983

O. C. D.
ARTESIA, OFFICE

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator David C. Collier ✓	8. Farm or Lease Name Welch
3. Address of Operator P.O. Box 798, Artesia, New Mexico 88210	9. Well No. #9
4. Location of Well UNIT LETTER <u>J</u> 2110 FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>17</u> TOWNSHIP <u>18S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat Artesia Queen GR SA
15. Elevation (Show whether DF, RT, GR, etc.) 3620	12. County Eddy

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

Well was spudded on August 2, 1983.

8/3/83

Ran 365' of 8 5/8", 24# J55 casing.
Cemented with 300 sxs Class "C" neat 2% CaCl.
WOC 18 hours.
Plugged down at 6:00 am.

Pressure tested at 1000# for 30 minutes - held fine.

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

SIGNED Leslie A. Clements TITLE Production Clerk DATE Aug. 3, 1983
Original signed by
Leslie A. Clements
Supervisor District II

APPROVED BY _____ TITLE _____ DATE AUG 05 1983
CONDITIONS OF APPROVAL, IF ANY: