

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-101
Revised 10-1-78

MAR 26 1981

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-10716
7. Unit Agreement Name
8. Farm or Lease Name Caroline
9. Well No. 6
10. Field and Pool, or Wildcat East Millman 7-R
12. County Eddy

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
Frank Boyce

Address of Operator
Box 426, Artesia, NM 88210

Location of Well
UNIT LETTER C 330 FEET FROM THE North LINE AND 2310 FEET FROM
THE West LINE, SECTION 28 TOWNSHIP 19 RANGE 28 N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

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 checked="" 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 type="checkbox"/>	

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.

Cleaned out and put on production.

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

SIGNED <u>Robert P. Parker</u>	TITLE <u>Agent</u>	DATE <u>3-5-81</u>
APPROVED BY <u>Mike Williams</u>	TITLE <u>Oil and Gas Inspector</u>	DATE <u>MAR 11 1981</u>

CONDITIONS OF APPROVAL, IF ANY: