

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
RECEIVED BY
MAY 18 1984
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

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.)

OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- <input type="checkbox"/>	5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input type="checkbox"/>
Name of Operator GRSJ PETROLEUM ✓			5. State Oil & Gas Lease No.
Address of Operator P.O. Box 6, Loco Hills, New Mexico 88255			7. Unit Agreement Name LC-047800 (a) Taylor Unit
Location of Well UNIT LETTER I, 1980 FEET FROM THE S LINE AND 660 FEET FROM T1E LINE, SECTION 12 TOWNSHIP 18S RANGE 31E NMPM.			8. Farm or Lease Name Taylor Unit
			9. Well No. 1
			10. Field and Pool, or Wildcat Shugart (Y, SR, O.G.)
15. Elevation (Show whether DF, RT, GR, etc.)			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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <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.

Hooked up Gas line, set gas motor and started testing.
Flushed well with 65 barrels fresh water and started beck to pumping.
We would like an allowable of 3 barrels per day.

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

SIGNED LWS Hank TITLE Co-owner DATE 5/17/84

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: