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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. LG-2353	

## SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED (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"/>		JUL 11 1980	
2. Name of Operator Flag-Redfern Oil Company		O. C. D.	
3. Address of Operator P.O. Box 2280 Midland, Texas 79702		ARTESIA, OFFICE	
4. Location of Well UNIT LETTER M 660 FEET FROM THE West LINE AND 660 FEET FROM THE South LINE, SECTION 2 TOWNSHIP 19-S RANGE 31-E N.M.P.M.		7. Unit Agreement Name	
		8. Farm or Lease Name New Mexico State	
		9. Well No. 4	
		10. Field and Pool, or Wildcat Shugart Und (Yates 7R, Q, 6b)	
15. Elevation (Show whether DF, RT, GR, etc.) 3601 GL		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 type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Ran surface casing

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.

6-23-80 Ran 21 jts. 8-5/8", 24#/ft, K-55, ST&C casing and set at 833'. Cemented w/275 sx. Halliburton Light, 2% CaCl, followed by 200 sx. C1 C. Circulated 50 sx. to surface. Tested to 1000 psi. WOC 18 hrs.

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

SIGNED <u>[Signature]</u>	TITLE <u>Drlg. Superintendent</u>	DATE <u>7-10-80</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR, DISTRICT II</u>	DATE <u>JUL 14 1980</u>
CONDITIONS OF APPROVAL, IF ANY:		