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NEW MEXICO OIL CONSERVATION COMMISSION

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

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5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS APR - 9 1979

(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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>	O. C. C. ARTEBIA, OFFICE	7. Unit Agreement Name
2. Name of Operator C & K Petroleum, Inc. ✓		8. Farm or Lease Name Carlsbad "12" COM.
3. Address of Operator P.O. Drawer 3546, Midland, Texas 79702		9. Well No. 1
4. Location of Well UNIT LETTER 0, 1760 FEET FROM THE East LINE AND 840 FEET FROM THE South LINE, SECTION 12 TOWNSHIP 22-S RANGE 26-E NMPM.		10. Field and Pool, or Wildcat So. Carlsbad Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3127 Gr.		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"/>
FULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER Squeeze Perfs. 11483-11561 & reperforate Morrow 11284-11407 & recomplete. <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.

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

SIGNED [Signature] TITLE Administrative Supervisor DATE March 20, 1979

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE APR 11 1979

CONDITIONS OF APPROVAL, IF ANY: