

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	<input checked="" type="checkbox"/>
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OPERATOR	<input checked="" type="checkbox"/>

RECEIVED BY
CONSERVATION DIVISION
P. O. BOX 2088
FEB 19 1985
NEW MEXICO 87501
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
L-3568

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 GAS ☐ WELL OTHER ☐
2. Name of Operator
MONSANTO OIL COMPANY
3. Address of Operator
1300 One First City Center, Midland, Texas 79701
4. Location of well
UNIT LETTER R 1980 FEET FROM THE South LINE AND 660 FEET FROM
THE East LINE, SECTION 2 TOWNSHIP 21 S RANGE 27 E N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.)
3212' GR
12. County
Eddy

10. 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"/>	

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.

11/10/84 Drlg 12 1/2" hole to 2560' & set 8 5/8" csg. 39# & 24# csg @ 2558' & cmt. w/1400 sx cmt.
Circ 100 sx to surf. WOC 18 hrs pressured up 600# & held 30 min.

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 Regional Prod. Manager DATE 2/11/85

APPROVED BY Leslie A. Clements TITLE Supervisor District II DATE FEB 19 1985
CONDITIONS OF APPROVAL, IF ANY: