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LAND OFFICE	
OPERATOR	1

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.	
OG - 1223	
7. Unit Agreement Name	
8. Farm or Lease Name	
Phillips State	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
Eddy	

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>	
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	
2. Name of Operator Byron M. McKnight and Frank M. Agar ✓	
3. Address of Operator P. O. Box 297 Hobbs, New Mexico	
4. Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>west</u> LINE AND <u>660</u> FEET FROM THE <u>north</u> LINE, SECTION <u>17</u> TOWNSHIP <u>23-S</u> RANGE <u>27-E</u> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 3203 Gr.	

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <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.

Well spudded August 18, 1967

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>Byron M. McKnight</u>	TITLE <u>Partner</u>	DATE <u>8-24-67</u>
APPROVED BY <u>W. C. Gresscott</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		