NO. OF COPIES RECEIVED	3					_	
	+				Form C-103 Supersedes		
DISTRIBUTION	+,	₩,	RE NEW MEXICO OIL CONSE	CEJVED	C-102 and		
SANTA FE	/ /	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	IEW MEXICO OIL CONSE	ERVATION COMMISSION	Effective 1	-1- 65	
FILE	11		A 1.	216 4 44 4	r		
U.S.G.S.			N(DV 171970	5a. Indicate Ty		
LAND OFFICE	\perp				State 🗶	Fee 📘	
OPERATOR	1			O. C. a.	1 _	Gas Lease No.	
				ESIA, OFFICE	L-1582		
	SU	NDRY NOTICE	S AND REPORTS ON 1	WELLS			
(DO NOT USE THIS F Usi			ILL OR TO DEEPEN OR PLUG BA T - " (FORM C-101) FOR SUCH				
1.					7. Unit Agreem	nent Name	
OIL GAS	i I	OTHER-					
2. Name of Operator					8. Form or Lea	ise Name	
Corinne Grace						Panagra	
3. Address of Operator						9. Well No.	
•			. Tue De-040	Habba W W ddald			
	3 &	Nes Belaices	i, inc., box 703,	Hobbs, N. M. 88240	1		
4. Location of Well					1	Pool, or Wildest	
UNIT LETTER	·	990 FE	ET FROM THE North	LINE AND FEET FR	om Undes.	3. Carlsbad	
THE Rest	LINE	SECTION 11	TOWNSHIP 23 \$	26 B NM	<i>(</i>		
		JEC 110N	TOWNSHIP	RANGENM	/////////////////////////////////		
	TT	15	. Elevation (Show whether I	OF, RT, GR, etc.)	12. County		
	////		3268.5 GR		Eddy		
16.	777	<i></i>					
	Che	eck Appropriate	e Box To Indicate Na	ature of Notice, Report or 0	Other Data		
NOT		F INTENTION			NT REPORT O	F:	
PERFORM REMEDIAL WORK	٦		PLUG AND ABANDON	REMEDIAL WORK	Alt	ERING CASING	
TEMPORARILY ABANDON	Ħ			COMMENCE DRILLING OPNS.			
<u> </u>	닉			FF-1	PLU	G AND ABANDONMENT	
PULL OR ALTER CASING			CHANGE PLANS	CASING TEST AND CEMENT JOB		ـــــا	
				OTHER			
OTHER							
17 Degaths Designed of C	'omplet	had Operations (Cla	anly state all portions data	ils, and give pertinent dates, includ		-6	
work) SEE RULE 1103.		ed Operations (ore	arty state art pertinent deta	iis, and give periment dates, includ	ing estimated date	of starting any proposed	
		Mayad in	Jack Burrows Part	mership Cable Tool			
		390 A 465 Til A	MAN DESTANT THE	meranth empte reer			
		A	/mo	3 /08 h-1- 4-00 A W	11/15/70		
		Rig 11/14,	/70. Spudded I'/	1/2" hele 8:00 A. M.	TT/T2//0•		
					•		
18. I hereby certify that the	inform	nation above is true	and complete to the best o	f my knowledge and belief.			
<i>i/</i> .		11 1.1					
Allana.	1. 1.	10/1/00		Agent	DATE	11/16/70	
SIGNED LUNING	10					11/12//4	
			TITLE	AG 300		TT/ TO/ (A	
-		<i>'</i>				11/10/10	
/1/	 2	4		基準に対象は、195gg		1072 2 1920	

CONDITIONS OF APPROVAL, IF ANY: