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NEW MEXICO OIL CONSERVATION COMMISSION

OCT 26 1977

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

O. C. C.
ARTERIA. OFFICE

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
L-1582	

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator CORINNE GRACE ✓		8. Farm or Lease Name Humble-Grace Com
3. Address of Operator P. O. BOX 1418, CARLSBAD, NEW MEXICO 88220		9. Well No. 1
4. Location of Well UNIT LETTER <u>P</u> <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>2</u> TOWNSHIP <u>23S</u> RANGE <u>26E</u> NMPM.		10. Field and Pool, or Wildcat So. Carlsbad Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3268 DF		12. County Eddy

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>	

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.

10/22/77

The leak on this well head was through the valve on the bottom casing head between the 13 3/8" and 9 5/8" casing.

Replaced the L, and installed a bull plug and needle valve and shut off leak.

Request permission to turn this well back on line.

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

SIGNED Gertrude Jones Wildberger TITLE Agent DATE 10/25/77

APPROVED BY W. C. Gressett TITLE SUPERVISOR, DISTRICT II DATE NOV 1 1977

CONDITIONS OF APPROVAL, IF ANY: