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DISTRIBUTION			Supersedes Old	
SANTA FE	NE	W MEXICO OIL CONSERVATIO	ON COMMISSION	C-102 and C-103 Effective 1-1-65
FILE			T)	
U.S.G.S.				5a. Indicate Type of Lease
LAND OFFICE				State Fee 🗙
OPERATOR				5. State Oil & Gas Lease No.
		APTESIA, OFFI	CE	
(DO NOT USE THIS FOR USE **/	SUNDRY NOTICES	AND REPORTS ON WELLS)IFFERENT RESERVOIR.	
I. OIL GAS WELL WELL		<u>,</u> ,,,,,		7. Unit Agreement Name
2. Name of Operator CITIES SERVICE (8. Farm or Lease Name Merland B Com.			
3. Address of Operator P.O. Box 69, Hob	9. Well No.			
4. Location of Well				10. Field and Pool, or Wildcat
G	1980	PROM THE LINE A	1980 ND FEET FR	S.Carlsbad Morrow Undes
UNIT LETTER	20			
ECD L THE LINI	E, SECTION	225	27E NMF	× ())))))))))))))))))))))))))))))))))))
	E, SECTION	Z2S TOWNSHIP RA Elevation (Show whether DF, RT, 6 3200 GR (EST.)		Der. 12. County Eddy
	E, SECTION	Elevation (Show whether DF, RT, (3200 GR (EST.)	GR, etc.)	12. County Eddy
тне LINI	E, SECTION	Elevation (Show whether DF, RT, o 3200 GR (EST.) Box To Indicate Nature o	GR, etc.) f Notice, Report or (12. County Eddy
тне LINI	E, SECTION 15. F Check Appropriate	Elevation (Show whether DF, RT, 0 3200 GR (EST.) Box To Indicate Nature o O: PLUG AND ABANDON REMEDIA COMMEN	GR, etc.) f Notice, Report or (SUBSEQUE	12. County Eddy
THE LINI	E, SECTION 15. F Check Appropriate	Elevation (Show whether DF, RT, C 3200 GR (EST.) Box To Indicate Nature o O: PLUG AND ABANDON REMEDIA CHANGE PLANS COMMEN	GR, etc.) f Notice, Report or (SUBSEQUE LL WORK CE DRILLING OPNS.	12. County Eddy Dther Data NT REPORT OF: ALTERING CASING

 Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1103.

TD336 Anhydrite. Prep. to drill. Spud @ 7:30 a.m. on 5-15-71. Ran 10 jts. (317) 13 3/8" OD 48# H-40 casing. Set and cemented @ 335 w/380 sacks Class "C" W/2% CaCl2 cement. Plug down @ 12:40 a.m. on 5-16-71. Circulated 50 sacks cement. W0C 24 hrs. Tested 13 3/8" casing and rams to 1000 psi for 30 min. with no drop in pressure.

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

SIGNED	Original Signer G. D. Roberts <u>cin</u>	Dist. Admin. Supervisor	May 20, 1971
APPROVED BY	W. a. Sresset	UIL AND GAS INSPECTOR	DATE MAY 2 1971

CONDITIONS OF APPROVAL, IF ANY: