	*	Α.	
NO. OF COPIES RECEIVED			Form, CHALLS
DISTRIBUTION		95051	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION E D	Effective 1-1-65
FILE			30-015-22475
U.S.G.S.		AUG 1 0 1978	5a, Indicate Type of Lease
LAND OFFICE		1100 10 1070	State Fee X
OPERATOR		~ ~ ~	5. State Oil & Gas Lease No.
OPERATOR		O. C. C.	
SHNDDY	NOTICES AND REPORTS ON		
(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.			7. Unit Agreement Name
OIL GAS WELL X	OTHER-		
2. Name of Operator			8, Farm or Lease Name
J. C. Barnes Oil Company			Little Squaw Com.
3. Address of Cperator			9. Well No.
P. O. Box 505 Midland, TX 79702			1
4 Location of Well			10. Field and Pool, or Wildcat
F 19	980 N	LINE AND FEET FROM	Wildcat - Morrow
UNIT LETTER,			
THE W LINE, SECTION 27 TOWNSHIP 22 S RANGE 28 E NMP			
THE LINE, SECTION	TOWNSHIP	RANGE	
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
3074' G.R.			Eddy
Check Appropriate Box To Indicate Nature of Notice, Report or O			her Data
NOTICE OF INT		SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
POLL OR ACTER CASING		OTHER	
OTHER	. [
 			
17. Describe Proposed or Completed Ope	rations (Clearly state all pertinent de	tails, and give pertinent dates, including	z estimated date of starting any proposed
work) SEE RULE 1103.			
Drilled 7 3/4" hol	e @ 12.735.00'		
Ran 5 1/2" casing	(17 & 20#) to 12,745.0	0' - July 20, 1978	
1.6.1 5 2, 2 3.1.2			
Cement used			
800 sx Type H w/	3/4 of 1% CFR-2		
1/4# FS. 4/10 of	1% Hal. 22, 5# KCL		
650 sx Trin. Lit	e WT		
TOC outside casing	by Temp survey - 6000	1	
	•		
Wait on workover u	nit and casing test		
	-		
18. I hereby certify that the information	above is true and complete to the bes	t of my knowledge and belief.	
1/2000	i	riald Come	August 8, 1978
SIGNED / (/// /	EUKL TITLE_	Field Supt.	DATE
			ALL SHE

CONDITIONS OF APPROVAL, IF ANY: