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NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED

AUG 9 1979

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

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

SUNDY 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | 7. Unit Agreement Name |
| 2. Name of Operator Cities Service Company ✓ | | 8. Farm or Lease Name Villa "A" Com |
| 3. Address of Operator P.O. Box 1919 Midland, TX 79702 | | 9. Well No. 1 |
| 4. Location of Well UNIT LETTER <u>K</u> <u>1650</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>8</u> TOWNSHIP <u>23S</u> RANGE <u>28E</u> NMPM. | | 10. Field and Pool, or Wildcat Und. N. Loving-Morrow Gas |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3024.9' GR | | 12. County Eddy |

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 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 JOB <input type="checkbox"/> | Well completion data <input checked="" 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.

SEE ATTACHMENT:

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

SIGNED E. J. J. J. TITLE Region Operations Mgr. DATE 8/7/79

APPROVED BY W. A. Gussert TITLE SUPERVISOR, DISTRICT II DATE AUG 13 1979

CONDITIONS OF APPROVAL, IF ANY: