

clsr
lp

Form C-103

Revised March 25, 1999

Submit 3 Copies To Appropriate District Office

- District I
1625 N. French Dr., Hobbs, NM 87240
- District II
811 South First, Artesia, NM 87210
- District III
1000 Rio Brazos Rd., Aztec, NM 87410
- District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. <u>30-015-24316</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <u>Moore Fed Com</u>
8. Well No. <u>1E</u>
9. Pool name or Wildcat <u>White City Penn</u>

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. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator <u>Murphy Oil & Gas, Inc.</u>
3. Address of Operator <u>1445 Ross Avenue Ste 5300 LB152 Dallas TX</u>
4. Well Location Unit Letter <u>E</u> : <u>1450</u> feet from the <u>North</u> line and <u>440'</u> feet from the <u>West</u> line Section <u>35</u> Township <u>24S</u> Range <u>24E</u> NMPM <u>Eddy</u> County
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>KB 3247 GR 3252</u>

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" 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"/> MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

12. 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. For Multiple Completions : Attach wellbore diagram of proposed completion or recompilation.

see Attached



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

SIGNATURE T. W. Felson TITLE AGENT DATE 10/12/97

Type or print name Tommy Felson Telephone No. 255-85-8302

APPROVED BY Jim W. Gurn TITLE District Supervisor DATE 10-15-97

Conditions of approval, if any: