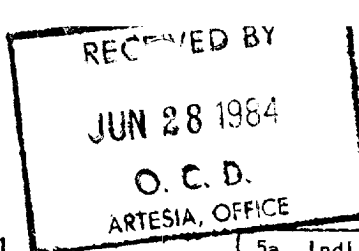


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P.O. Box 2088
SANTA FE, NEW MEXICO 87501



Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

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. OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER	7. Unit Agreement Name
2. Name of Operator Read & Stevens, Inc.			8. Farm or Lease Name Otis "33"
3. Address of Operator P.O. Box 1518, Roswell, NM 88201			9. Well No. 2
4. Location of Well UNIT LETTER C 990 FEET FROM THE North LINE AND 2130 FEET FROM THE West LINE. SECTION 33 TOWNSHIP 22S RANGE 27E NMPM			10. Field and Pool, or Wildcat Und. South Carlsbad Morrow
5. Elevation(Show whether DF,RT,GR,etc.) 3135.6' GL			12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		
OTHER	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>		
OTHER Swabbing	<input checked="" type="checkbox"/>		

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.

6-27-84 TP 400psi, bled down, SSG, FL 6300', swbd 11 1/2hrs, rec 30 BLW, 5 BLTR, SION.

6-28-84 TP 100psi, bled down, SSG, 3' flare, FL 8700', swbd 10hrs, recd 5 BLW & 20 BBIs fm water.

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

SIGNED Lucia Beardman TITLE Production Clerk DATE 6-28-84

Original Signed By

Leslie A. Clements
Supervisor District II

APPROVED BY _____ TITLE _____ DATE JUL 09 1984

CONDITIONS OF APPROVAL, IF ANY: