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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 2 1979

O. C. C.
ARTESIA, OFFICE

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG 6262	
7. Unit Agreement Name	
8. Farm or Lease Name	
COTTONWOOD SPRINGS STATE	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
WILDCAT No. 1	
12. County	
Eddy	

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 ☐ GAS WELL ☒ OTHER-
2. Name of Operator
MONSANTO COMPANY
3. Address of Operator
1330 Midland NBT, Midland, Tx. 79701
4. Location of Well
UNIT LETTER 0 660 FEET FROM THE South LINE AND 1980 FEET FROM
THE East LINE, SECTION 16 TOWNSHIP 25S RANGE 26E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3376 Gr.

16. 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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input 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.

Spudded 20" hole 5:00 PM 7/28/79; drilled to 272';
Ran 275' of new 16" 65# H-40 ST&C Casing set at 255'.
Cemented w/ 300 Sx. Class "C" + 2% CaCl + 1/4# Cello flakes per sx + 5# Gilsonite Sx.
Plug down 9:15 PM 7/29/79; WOC 24 Hrs; tested w/ 1000 psi for 30 Mins.; held OK

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

SIGNED [Signature] TITLE Regional Production Manager DATE 8/1/79

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE AUG 3 1979

CONDITIONS OF APPROVAL, IF ANY: