

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 ☐ GAS WELL ☐ OTHER- WATER INJECTION WELL		7. Unit Agreement Name HOSPAN SAND UNIT
2. Name of Operator TESORO PETROLEUM CORPORATION		8. Farm or Lease Name
3. Address of Operator 8700 TESORO DRIVE SAN ANTONIO, TX 78286		9. Well No. 70
4. Location of Well UNIT LETTER N 800 FEET FROM THE SOUTH LINE AND 1880 FEET FROM THE WEST LINE, SECTION 36 TOWNSHIP 18N RANGE 9W NMPM.		10. Field and Pool, or Wildcat HOSPAN
15. Elevation (Show whether DF, RT, GR, etc.) 7000' GR		12. County McKinley

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☒	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOBS ☐
OTHER ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

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.

TD 1675'
8 5/8" CSG AT 64', 4 1/2" at 1628'
OPEN HOLE 1628'-75'
LOCATED CASING HOLE AT 1080' in 3/86.

PROCEDURE: SPOT SAND IN CASING TO 1600', RUN 2 3/8" TBG TO 1600'. CEMENT TUBING W/ 100 SY CEMENT. GIH W/ 1 1/4" WASH PIPE + WASH SAND TO 1675'. RETURN WELL TO INJECTION.

RECEIVED
MAR 04 1987

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

SIGNED Charles J. Gholson TITLE AREA PRODUCTION MANAGER DATE 2/26/87

APPROVED BY Original Signed by CHARLES GHOLSON

DEPUTY OIL & GAS INSPECTOR, DIST. #3

DATE

MAR 04 1987

CONDITIONS OF APPROVAL, IF ANY: