| NO. OF COPIES RECEIVED | | |
|---|---|---|
| DISTRIBUTION | | |
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| OPERATOR | | |

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

## NEW MEXICO OIL CONSERVATION COMMISSION

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.
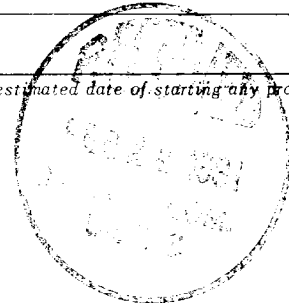USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1.
OIL WELL ☐   GAS WELL ☒   OTHER-

7. Unit Agreement Name

2. Name of Operator

**C & E Operators, Inc.**

8. Farm or Lease Name

**Aztec**

3. Address of Operator

**One Energy Square - Suite 170 - Dallas, Texas    75206**

9. Well No.

**8-A**

4. Location of Well

UNIT LETTER **P**, **800** FEET FROM THE **South** LINE AND **865** FEET FROM

THE **East** LINE, SECTION **8** TOWNSHIP **30N** RANGE **11W** NMPM.

10. Field and Pool, or Wildcat

**Blanco MV**

15. Elevation *(Show whether DF, RT, GR, etc.)*

**5573' GL**

12. County

**San Juan**

16.
## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO: | | | SUBSEQUENT REPORT OF: | |
|---|---|---|---|---|
| PERFORM REMEDIAL WORK ☐ | PLUG AND ABANDON ☐ | REMEDIAL WORK ☐ | ALTERING CASING ☐ |
| TEMPORARILY ABANDON ☐ | | COMMENCE DRILLING OPNS. ☐ | PLUG AND ABANDONMENT ☐ |
| PULL OR ALTER CASING ☐ | CHANGE PLANS ☐ | CASING TEST AND CEMENT JOB ☐ | |
| | | OTHER ____ | ☐ |
| OTHER ____ ☐ | | | |

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.

**We request intent to drill be extended 90 days.**

*6 mi*

*8-23-81*

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

SIGNED _____  TITLE **Agent**  DATE **2/24/81**

FEB 24 1981

**Original Signed by FRANK T. CHAVEZ**

APPROVED BY _____  TITLE **SUPERVISOR DISTRICT # 3**  DATE ____

CONDITIONS OF APPROVAL, IF ANY: