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OF			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-101
Effective 1-1-85

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. <input type="checkbox"/> WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator JOEL B. BURR, JR.	8. Farm or Lease Name FOOTHILLS C
3. Address of Operator 300 W. ARRINGTON, STE. 300, FARMINGTON, N.M. 87401	9. Well No. 1
4. Location of Well UNIT LETTER A 1070 FEET FROM THE NORTH LINE AND 945 FEET FROM THE EAST LINE, SECTION 14 TOWNSHIP 30N RANGE 13W NMPM.	10. Field and Pool, or Wildcat WILDCAT Fr
15. Elevation (Show whether DF, RT, GR, etc.) 5741 GR	12. County SAN JUAN

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Drilled 5 1/4" hole to 1945'. Ran open hole logs. Ran 2 7/8" E.U.E 8 rd. casing to 1880'. Cemented with 161 cu. ft. 65/35 Pozmix, 12% gel, 12 1/4 lb. Gilsonite per sack followed by 176 cu. ft. 50/50 Pozmix, 2% gel, 12 1/4 lb. Gilsonite per sack. Job complete 12/07/84.

REC'D
JUN 25 1985
OIL CON. DIV.
DIST. 3

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

SIGNED John Alexander
JOHN ALEXANDER

TITLE AGENT

DATE 06/21/85

APPROVED BY Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT # 3

DATE

JUN 25 1985

CONDITIONS OF APPROVAL, IF ANY: