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NEW MEXICO OIL CONSERVATION COMMISSION

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SEP - 6 1978

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

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
LG 2478

SUNDRY NOTICES AND REPORTS ON WELLS

O.C.C.
ARTESIA OFFICE

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator MONSANTO COMPANY	8. Farm or Lease Name DELTA STATE COM.
3. Address of Operator 1330 Midland NBT, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>2180</u> FEET FROM THE <u>W-st</u> LINE, SECTION <u>20</u> TOWNSHIP <u>19S</u> RANGE <u>28E</u> NMPM.	10. Field and Pool, or Wildcat U.S. Millman-Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 3474' RKB	12. County Eddy

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

Drilled 8 3/4" hole to 11,055'; dry hole; plugged and abandoned as follows:

Plug No.	Depth	Sx. Cmt.
1	10,750-550	106
2	9700-9600	53
3	9400-9300	53
4	8750-8650	53
5	6600-6500	53
6	4600-4500	53
7	2890-2790	53
8	0-29	10

Hole between plugs was filled w/ better than 25% Gel per bbl wtr;
4" pipe marker w/ location thereon was set at surface.

You will be notified when location is cleaned up and ready for inspection.

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

SIGNED [Signature] TITLE Regional Prod. Mgr. DATE 9/5/78

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: