NO. OF COPIES RECEIVED	4		Form C-103
DISTRIBUTION		RECEIVED	Supersedes Old C-102 and C-103
SANTAFE	NEW MEXICO OIL CONS	RECEIVED ERVATION COMMISSION	Effective 1-1-65
FILE		. Y 6 m	
U.S.G.S.		MAR 1 9 1975	5a. Indicate Type of Lease
LAND OFFICE			State Fee X
OPERATOR	1		5, State Oil & Gas Lease No.
		O. C. D.	
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 X GAS WELL X	OTHER•		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
· ·	io condenstin Co.		L & Sa Si 32
3. Address of Operator			9. Well No.
			in .
・Ox 235性 みかれた 。5 xas 1			10. Field and Pool, or Wildcat
UNIT LETTER 3 , 30 FEET FROM THE 50 LINE AND 500 FEET FROM			· 1
UNIT LETTER	FEET FROM THE	LINE AND FEET FRO	Marining Maring
THE TOWNSHIP TOWNSHIP RANGE PIN NMPM.			
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	11111 1978 3xx 3727 111		Chaves AllIIIII
16. Check	Appropriate Box To Indicate N	lature of Notice Report or O	ther Data
	NTENTION TO:		IT REPORT OF:
1101102 01 11	TIZITION TO.	33552432.	· · · · · · · · · · · · · · · · · · ·
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK	PEOG AND ABANDON		PLUG AND ABANDONMENT
TEMPORAR (LY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JQB	
		OTHER	
OTHER			
17. Describe Proposed or Completed O	perations (Clearly state all pertinent det	ails, and give pertinent dates, including	ng estimated date of starting any proposed
work) SEE RULE 1103.			
3/25/75			
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Sat cament objective	ir top or simi ac e 10	racks carema	
750 - 250 ft. 33 sac s "			
	1025 - 1125 ft. 33 100 - 1600 ft. 33	THE STATE OF THE S	
	11(6) = 1600 ft 33	14	
	2) 3? - 2237 ft. 33	noise amenant	
	27); = 223(16. 33	Back S Cament.	
rained read between the	я s Red belor ri dge 2k0 ft.	to 300 ft. drilled one	with books, to inc
went to botton, 223/	i t		• · · · · ·
			The state of the s
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		1	
18. I hereby certify that the information	n above is true and complete to the best	of my knowledge and belief.	
	<i>()</i>		
1 62	\bigvee .	Contractor	0476 241747E
SIGNED	TITLE	COHLUBCIO	
			HIM 1 1 107F
	ivi a	SUPERVISOR, DISTRICT II	JUN 111975
APPROVED BY Colons	The TITLE	DUI LILY IDOIG DISTILLOT 12	DATE