NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION		A	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO RL EOG	EVATION ED MISSION	Effective 1-1-65
FILE			
U.S.G.S.	ADD	1 1975	5a. Indicate Type of Lease
LAND OFFICE	APR	1 13/3	State Fee X
OPERATOR			5. State Oil & Gas Lease No.
		<u>, C, C,</u>	
SUN	IDRY NOTICES AND REPORTS OF PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BUILDING FOR PERMIT -" (FORM C-101) FOR SUC	MELDE ICE	
(DO NOT USE THIS FORM FOR USE "APPLI	PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BY ICATION FOR PERMIT -** (FORM C-101) FOR SUC-	ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.)	
1.			7. Unit Agreement Name
OIL GAS WELL WELL	OTHER-		
2. Name of Operator			8. Farm or Lease Name
Plains A <u>sci</u> c	imakaonsaina iin. 📶 🔻		I 4 Arneb 28 💥
3. Address of Operator			9. Well No.
1.000 (13.5 <u>4</u>)	1 cmillo, 18248 7/1/5) I
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER	FEET FROM THE	LINE AND FEET FROM	12 Wildrat
· · · · · · · · · · · · · · · · · · ·			
THE 20 LINE, SE	ection 28 township 25	RANGE NMPM	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3°52		Ohaves
16. Chec	ck Appropriate Box To Indicate N	lature of Notice. Report or Ot	her Data
	FINTENTION TO:	-	T REPORT OF:
NOTICE OF	TATENTION TO:	30532432.	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
	FEGG AND ADARDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLANS	CASING TEST AND CEMENT JOB	7 EGG AND ADARDON MENT
PULL OR ALTER CASING	CHANGE PLANS		
		OTHER	
OTHER			
	ed Operations (Clearly state all pertinent dete	ails, and give pertinent dates, including	g estimated date of starting any proposed
work) SEE RULE 1103.			
Set on ent plugs	7th 2	ID 2475	
0 - 10 25	ϵ_{*} . We shall denote ϵ_{*}		
oo l: Ω ≠			
370 - 1170 8%	i 33 eachs "		
370 - 1,70 ft 12 11 - 10 11; ft 2341; - 21,40 ft	t. 33 sakos "		
23/11 - 21/11 5	t. 3º sacks "		
kimani mudi retwoen	al ga. mid, a to 530 %.		-, fluid bovel at 300 ft.
Work completed as	organic of Toye		
A	left in how - 8/8"- 430	1-150	
(2)	My I I I I I I I I I I I I I I I I I I I		
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18. I hereby certify that the information	ation above is true and complete to the best	of my knowledge and belief.	
<u> </u>	(()		
SIGNED	TITLE	Coercie r	
SIGNED			
,			
ABBROVED BY Selfa	Me TITLE	SUPERVISOR DISTRICT II	DATE JUN 1 1 1975

CONDITIONS OF APPROVAL, IF ANY: