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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 9 1969

O. C. C.
ARTESIA, OFFICE

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

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Sam G. Dunn Oil Operations 3. Address of Operator Box 3095 Lubbock, Texas 79410 4. Location of Well UNIT LETTER L , 2310 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 4 TOWNSHIP 8-S RANGE 27-E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3979 gr	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> 5. State Oil & Gas Lease No. K-1006 7. Unit Agreement Name 8. Farm or Lease Name Avalanche-Journal St. 9. Well No. 5 10. Field and Pool, or Wildcat Acme San Andres 12. County Chaves
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER **Acidize and test** ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

12-2-66

Acidized perforations 1916-1940' with 11,000 gal. 15% acid
Swab acid water put on pump to test

Jan. 1967 test averaged 1-1/2 bbl. oil per day 6 bbl. water per day

Present production 3/4 bbl. oil per day 5 bbl water per day. 5-69

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

SIGNED Wm T. Thomas

TITLE **Geologist**

DATE **5-8-69**

APPROVED BY _____

TITLE **OIL AND GAS INSPECTOR**

DATE **MAY 14 1969**

CONDITIONS OF APPROVAL, IF ANY: