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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-92	

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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection well
2. Name of Operator Mercury Production Company
3. Address of Operator 908 Fort Worth National Bank Bldg., Fort Worth, Texas
4. Location of Well UNIT LETTER C , 1650 FEET FROM THE W LINE AND 990 FEET FROM THE N LINE, SECTION 26 TOWNSHIP 10 S RANGE 26 E N.M.P.M.

7. Unit Agreement Name
8. Farm or Lease Name State E-92
9. Well No. 19
10. Field and Pool, or Wildcat Brown Queen

15. Elevation (Show whether DF, RT, GR, etc.)

12. County Chaves

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER Commence injection <input checked="" 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.

Water Injection commenced in this well on 3-31-67

RECEIVED

MAY 1 1967

O. C. C.
ARTESIA, OFFICE

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED Frank Hardin	TITLE President	DATE April 28, 1967
APPROVED BY W. A. Gressett	TITLE OIL AND GAS INSPECTOR	DATE
CONDITIONS OF APPROVAL, IF ANY:		