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OPERATOR	6

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"/> XX Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E 8879
7. Unit Agreement Name
8. Farm or Lease Name McALESTER STATE
9. Well No. 5
10. Field and Pool, or Wildcat <i>Coyote Queen</i>
12. County CHAVES

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"/> XX GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator DR. SAM G. DUNN	8. Farm or Lease Name McALESTER STATE
3. Address of Operator P. O. BOX 192 ARTESIA, NEW MEXICO 88210	9. Well No. 5
4. Location of Well UNIT LETTER L , 1650 FEET FROM THE SOUTH LINE AND 330 FEET FROM THE WEST LINE, SECTION 10 TOWNSHIP 11-S RANGE 27-E NMPM.	10. Field and Pool, or Wildcat <i>Coyote Queen</i>
15. Elevation (Show whether DF, RT, GR, etc.) 3665.7	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"/>	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 checked="" type="checkbox"/> XX	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

6-20-67

SPUDDED IN

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

SIGNED Thelma Hall TITLE AGENT DATE 6-21-67

APPROVED BY W. A. Grossett TITLE Supervisor DATE 6-21-67

CONDITIONS OF APPROVAL, IF ANY: