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# NEW MEXICO OIL CONSERVATION COMMISSION

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		5. State Oil & Gas Lease No.
2. Name of Operator H. N. Sweeney		7. Unit Agreement Name
3. Address of Operator P. O. Box 1582 - Roswell, New Mexico		8. Farm or Lease Name Browning
4. Location of Well UNIT LETTER <u>M</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>27</u> TOWNSHIP <u>8S</u> RANGE <u>29E</u> NMPM.		9. Well No. 1
15. Elevation (Show whether DF, RT, GR, etc.) 3955 GR		10. Field and Pool, or Wildcat Wildcat
12. County Chaves		

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input checked="" 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 1708.

Set used 7" 20# J-55 casing at 1265' with 50 sacks Regular with 2% calcium chloride. After WOC 18 hours tested at 1500# for 30 minutes, no drop in pressure.

**RECEIVED**

**APR 28 1967**

**O. C. C.  
ARTERIA, OFFICE**

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>H. N. Sweeney</u>	TITLE <u>Operator</u>	DATE <u>April 27, 1967</u>
APPROVED BY <u>W. A. Gresham</u>	TITLE <u>OIL AND GAS INSPECTOR</u>	DATE <u>APR 28 1967</u>
CONDITIONS OF APPROVAL, IF ANY:		