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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 type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |   |

## 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-  |  | 7. Unit Agreement Name   |
| 2. Name of Operator<br><b>H. N. Sweeney</b>  |  | 8. Farm or Lease Name<br><b>O'Brien "A"</b>                    |
| 3. Address of Operator<br><b>P. O. Box 1582 - Roswell, New Mexico 88201</b>  |  | 9. Well No.<br><b>1</b>  |
| 4. Location of Well<br>UNIT LETTER <b>B</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM<br><b>East</b> LINE, SECTION <b>1</b> TOWNSHIP <b>9S</b> RANGE <b>28E</b> NMPM. |  | 10. Field and Pool, or Wildcat<br><b>Twin Lakes San Andres</b> |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><b>3979' GR</b>   |  | 12. County<br><b>Chaves</b>                                    |

16.

### Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

#### NOTICE OF INTENTION TO:

|                       |                          |
|-----------------------|--------------------------|
| 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"/> |

#### 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 1103.

**Spud 8-21-67.**

**Set 8-5/8" 28# J-55 casing at 450' with 300 sacks Regular cement plus 2% calcium chloride. Cement circulated. After WOC 18 hours pressured up to 1000# for 30 minutes, held okay.**

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

SIGNED Martha J. West TITLE Production Clerk DATE August 24, 1967

APPROVED BY W. A. Gressett TITLE Operator DATE 10/1/67

CONDITIONS OF APPROVAL, IF ANY: