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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

5a. Indicate Type of Lease
State ☐ Fee ☒
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 - 1" (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 TLSAU
2. Name of Operator Pelto Oil Company		8. Farm or Lease Name
3. Address of Operator 500 Dallas, Suite 1800, Houston, TX 77002		9. Well No. 56
4. Location of Well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>9S</u> RANGE <u>28E</u> NMPM.		10. Field and Pool, or Wildcat Twin Lakes SA Assoc.
15. Elevation (Show whether DF, RT, GR, etc.) 3979 GR		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 OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Bring back on production</u> <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 1703.

TA'd producer, held for secondary recovery. TLSAU waterflood began April 20, 1988.
TLSAU #56 brought back on production 10/2/88.

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

SIGNED Bernie M. Alsos TITLE Production Admin. Manager DATE 11/3/88
Original Signed By Mike Williams
APPROVED BY _____ TITLE _____ DATE NOV 15 1988
CONDITIONS OF APPROVAL, IF ANY: