

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-005-62891

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☒

OTHER

RECEIVED

7. Lease Name or Unit Agreement Name

Hagler 23

2. Name of Operator

Marsh Operating Company

3. Address of Operator

P.O. Box 460, Dallas, TX 75221

4. Well Location

Unit Letter K : 1650 Feet From The west Line and 1650 Feet From The south Line

Section 23 Township 7S Range 26E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3827' RKB; 3816' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

100 foot cement plug 4320-4220'  
100 foot cement plug 2100-2000'  
100 foot cement plug 980-880', tag plug.  
15 sacks cement at surface in 8-5/8" casing above plugs per Mr. John Robinson NM  
Oil Conservation Division. Top of Abo at 4269', top of Glorietta at 2052', 8-5/8"  
casing at 930'. Proposed date 5/21/92.

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

SIGNATURE

TITLE

V.P. Production

DATE

6/18/92

TYPE OR PRINT NAME

Joe H. Clark

TELEPHONE NO. (214) 969-0500

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: