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NEW MEXICO OIL CONSERVATION COMMISSION  
SEP 9 1971

O. C. C.  
ARTESIA, OFFICE

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>L-594</b>
7. Unit Agreement Name <b>West Dog Canyon</b>
8. Farm or Lease Name <b>West Dog Canyon Unit</b>
9. Well No. <b>1</b>
10. Field and Pool, or Wildcat <b>Wildcat</b>
12. County <b>Utero</b>

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"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator <b>W. W. West</b>
3. Address of Operator <b>401 N. Colorado, Midland, Texas 79701</b>
4. Location of Well UNIT LETTER <b>H</b> <b>1990</b> FEET FROM THE <b>North</b> LINE AND <b>1103</b> FEET FROM THE <b>East</b> LINE, SECTION <b>18</b> TOWNSHIP <b>25 S</b> RANGE <b>20 E</b> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) <b>5809</b>

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☒  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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.

8-21-1971 Setting 13 3/8" & 65' Cementing with 28 Sacks.  
8-22-71 Waiting on cement  
8-23-71 Drilling

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

SIGNED W. W. West

TITLE Agent

DATE 9-8-71

APPROVED BY

W. A. Gressett

TITLE

OIL AND GAS INSPECTOR

DATE

**SEP 9 1971**

CONDITIONS OF APPROVAL, IF ANY: