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LAND OFFICE	
OPERATOR	

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 ☒ Fee ☐
5. State Oil & Gas Lease No.	B-9683

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 ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name Anderson Ranch
2. Name of Operator Continental Oil Company	8. Farm or Lease Name Anderson Ranch Unit
3. Address of Operator Box 460, Hobbs, N.M. 88240	9. Well No. 11
4. Location of Well UNIT LETTER F 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 11 TOWNSHIP 16-S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Anderson Ranch Well/Pool
15. Elevation (Show whether DF, RT, GR, etc.) 4304' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	OTHER ☒ Changed Plus from Remedial Unit
OTHER _____		APPROVED 3-9-78	

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.

Approval was given 5-3-78 to sidetrack junk in the hole and drill a new hole to TD. However after approx. 2 months the PKV was milked out and the Bridge Plug was pushed to 9860'. Therefore it was not necessary to drill a new hole in the subject well. Rig R015-18-78.

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

SIGNED Wm. A. Butterfield	TITLE Admin. Supv.	DATE 7-7-78
Orig. Signed by Jerry Sexton		
APPROVED BY Dist. 1, Supv.	TITLE NMOC (4), Partners (5), File	DATE JUL 10 1978
CONDITIONS OF APPROVAL, IF ANY:		