| NO. OF COPIES RECEIVED   |   | (all in-  | Form C-103  |                       |  |
|--|---|---|---|-----------------------|--|
| DISTRIBUTION   | NEW MEXICO OIL CONSERVATION COMMISSION  |   | Supersedes Old<br>C+102 and C+103   |                       |  |
| SANTA FE   |   |   | Effective 1-1-65  |                       |  |
| FILE   | <b></b>   |   | •   |                       |  |
| U.S.G.S.   |   |   | 5a. Indicate Type   | of Lease              |  |
| LAND OFFICE  |   |   | State 🗶   | Fee                   |  |
| OPERATOR   |   |   | 5. State Oil & Gas  | Lease No.             |  |
|  |   |   | 13-152  | <i>ن</i> و .          |  |
| SUNDRY   | Y NOTICES AND REPORTS ON WEL  | 15  | MINITE  |                       |  |
| (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 GAS WELL WELL   | OTHER•  |   | 7. Unit Agreement   | Nanie                 |  |
| 2. Name of Operator  |   |   | 8. Farm or Lease  | 8. Farm or Lease Name |  |
| 3. Address of Operator   |   |   | Bridges State   |                       |  |
|  |   |   | 9. Weil No.   |                       |  |
| Box 633, midland, Lexas 79701  |   |   | 163   |                       |  |
| 4. Location of Well  |   |   | 10. Field and Pool, or Wildcat  |                       |  |
| UNIT LETTER  |   |   |   | Vacuumaka No.         |  |
|  |   |   |   | MINNINI               |  |
| THE South LINE, SECTION 15 TOWNSHIP 17-5 RANGE 34-E NMPM.  |   |   |   |                       |  |
|  |   |   |   |                       |  |
|  | 15. Elevation (Show whether DF, 1   |   | 12. County  |                       |  |
| ğirili ili ili ili ili ili ili ili ili il  | 4043.5  | 60  | Lea.  | <u> </u>              |  |
| Check A  | Appropriate Box To Indicate Natur   | ~   | her Data<br>T REPORT OF:  |                       |  |
| [-7  | <u></u>   | . —   |   | F7                    |  |
| PERFORM REMEDIAL WORK  | — j   | MEDIAL WORK   | ALTERI  | NG CASING             |  |
| TEMPORARILY ABANDON  | I   | AMENCE DRILLING OPNS.   | PLUG AN   | O ABANDONMENT         |  |
| PULL OR ALTER CASING   | <u> </u>  | ING TEST AND CEMENT JOB   |   | الــــا               |  |
| OTHER  |   | OTHER   |   |                       |  |
| 17 Describe Proposed or Completed Op   | erations (Clearly state all pertinent details, o  | and give pertinent dates including  | s estimated date of s   | torting any proposed  |  |
| work) SEE RULE 1103.   | etations (oreally state are pertment actains,   | ma give periment dates, including   | ; estimated date of si  | turting any proposed  |  |
| 9/1 8850<br>15.50<br>0-599<br>in 1s<br>circ,<br>plug<br>csg,   | STATE #163 TD, WOC on 5% csg, ran # J-55 LT1C & ST&C csg 6, Howco emtd on botto t 1000x + 200x Class C lost circ, sqzd 200x 14 bbls short of displ RD, Rel Marcum Drlg Co hrs. TesTed 52"Gass | m w/ 2500x T1LW v<br>neat, PD @ 1:00<br>into form, CP 500<br>acement, set slip<br>rig @ 4:00 p.m. | 0, 15.50#<br>W/ W# Floce<br>p.m., cmt<br>00, stopped<br>ps, cut off<br>8/31/71. | <b>d</b>              |  |
|  |   | •   |   |                       |  |
|  |   |   |   |                       |  |
|  |   |   |   | •                     |  |
|  |   |   |   |                       |  |
|  |   |   |   |                       |  |
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|  | •   |   |   |                       |  |
|  |   | ÷   |   |                       |  |
|  |   |   |   |                       |  |
| 18. I hereby certify that the information  | above is true and complete to the best of my  | knowledge and belief.   |   |                       |  |
| 1 1 1 11 -   | <b>U</b>  | ,   |   | 4                     |  |
| SIGNED & \ -ME IN MALL   | X AITh  | enized Agent  | DATE 9-   | 20-71                 |  |
| - The state of the |   | J   |   | 40-14                 |  |
| Orig. Signed 1 Joe D. Rame   |   | ~   | SEP   | 20-7/<br>23 1971      |  |

Orig. Signed by

Joe D. Ramey

Conditions of Approval, If Any: