NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION		HONDS OF THE O. C. C.	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CON	HOLDS CATICE O. C. C.	Effective 1-1-65
FILE		i 27 G AU 107	
U.S.G.S.	•	Jul 27 9 11 AM '67	5a. Indicate Type of Lease
LAND OFFICE			State Fee.
OPERATOR			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 -" (FORM C-101) FOR SUCH PROPOSALS.)			
1. OIL GAS		· · · · · · · · · · · · · · · · · · ·	7. Unit Agreement Name
2. Name of Operator	OTHER-	· · · · · · · · · · · · · · · · · · ·	8, Farm or Lease Name
3. Address of Operator			9. Weil No. Rebinson
3. Address of Operator			9. Well No.
4. Location of Well	Hobbs, New Mexico		10. Field and Pool, or Wildcat
4, Location of Well			10. Field and Pool, or Wildcar
UNIT LETTER	980 — FEET FROM THE — North	LINE AND FEET FF	· Moore Renn
THE East LINE, SECTION	ON TOWNSHIP	8 RANGE 32 P NM	PM. (
	15. Elevation (Show whether	er DF, RT, GR, etc.)	12, County
		. 21, 111, 611, 6161,	12. 30 2
	43511 pg		Lea
		Nature of Notice, Report or	Other Data
NOTICE OF IN	ITENTION TO:	SUBSEQUE	NT REPORT OF:
	_	,	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	_	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
	_	OTHER	
OTHER		<u> </u>	
17 Describe Proposed on Completed On	erations (Clearly state all pertinent d	etails, and size portions datas, includ	ing estimated date of starting any proposed
work) SEE RULE 1 105.		and give permitting desco, one and	ong communes auto of clariting any proposes
Pull present pur	aping equipment. Re-pe	rforate the present Ato	ka perforations
from 9880' to 98	186' 9892' to 9896' 9	906' t o 9914', 9916' to	99201 99221 to
9926' 9948' to	99521 99581 +0 99621	9980' to 9988' and 10.	0001 += 10 0101
and perforate as	iditional section from	9776' to 9784', 9792' t	- 07071 00041
and periodate at	to Open and open and	2//0 to 2/04 , 3/32 t	0 9/9/*, 9804*
		9869'. Run tubing with	production
packer and swab	test.		
18. I hereby certify that the information	above is true and complete to the bes	t of my knowledge and belief.	
- 0			
SIGNED B.J. Rising		•	DATE
Vienes		istrict Superintendent	7=25=67
		.*	
			24.5
APPROVED BY	TITLE		DATE

CONDITIONS OF APPROVAL, IF ANY: