NO. OF COPIES RECEIVED] '		Form C-103
DISTRIBUTION]		Supersedes Old
SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE	THE WILLIAM STEED OF CONTROL		- · ·
	4	$C_{mT} = I_{s} + i rac{1}{2} $	5a. Indicate Type of Lease
U.S.G.S.	4	$Sinf(z) = \frac{1}{2}$	State T Fee
LAND OFFICE	_		5. State Oil & Gas Lease No.
OPERATOR	_	••• (5. State Off & Gds Ledse No.
			B9596
SUNDF (DO NOT USE THIS FORM FOR PR USE "APPLICA"	RY NOTICES AND REPORTS ON POPULATION OF PLUG BETTO OF PERMIT -" (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.)	
1.			7. Unit Agreement Name
OIL GAS WELL WELL	OTHER.		
2. Name of Operator			8. Farm or Lease Name
Amerada Petrole	State M "A"		
3. Address of Operator	9. Well No.		
	Califor Many Manufus		3
	Hebbs, New Mexico		10. Field and Pool, or Wildcat
4. Location of Well	44.		
UNIT LETTER	660 FEET FROM THE West	LINE AND FEET F	FROM MOOTE
THE South LINE SECT	10N 24 TOWNSHIP 118	RANGE 32E	WPM.
THE EINC, SECT			
	15, Elevation (Show whether	DF, RT, GR, etc.)	12. County
	4343 DF		I.aa ()
	<u> </u>		
Check	Appropriate Box To Indicate N	ature of Notice, Report or	Other Data
NOTICE OF INTENTION TO: SUBSEQUEN			ENT REPORT OF:
	ļ		
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			
Ornen			
17. Describe Proposed or Completed C work) SEE RULE 1103.	perations (Clearly state all pertinent dete	zils, and give pertinent dates, inclu	ding estimated date of starting any proposed

Plan to pull present production equipment. Run GR-N log from 8055' to 10,455'. Run coment retainer on tubing set at 10,450' & test BP at 10,455'. If plug is leaking squeeze perferations from 10,472' to 10,500' with 150 sx. Class "H" coment. If plug is not leaking reset retainer at 10,220' & squeeze perferations from 10,422' to 10,438' with 200 sx. Class "H" coment. Drill out

CR-N log. Acidiz	e with 500 gal	Devenian perosity as indica ls. 15% NE acid. Rerun pro	ted by duction
equipment and res	ume production	n.	
I hereby certify that the information above is true	and complete to the b	est of my knowledge and belief.	
Θ			
100 Och	TITLE _	District Superintendent	DATE 12-29-67
· /	`		
ROVED BY	TITLE_	•	DATE
IDITIONS OF APPROVAL, TE ANY			