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NEW MEXICO OIL CONSERVATION COMMISSION

JUL 17 2 06 PM '65

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. E-9035	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name	
2. Name of Operator Humble Oil & Refining Company		8. Farm or Lease Name New Mexico State "BQ"	
3. Address of Operator Box 2100, Hobbs, New Mexico		9. Well No. 1	
4. Location of Well UNIT LETTER <u>L</u> , <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>26</u> TOWNSHIP <u>10S</u> RANGE <u>33E</u> NMPM.		10. Field and Pool, or Wildcat Lane Penn South	
15. Elevation (Show whether DF, RT, GR, etc.) 4209 RDB		12. County Lea	

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 ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
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.

Pumping well - off production.

1. Pull rods and tubing.
2. Run tubing with hookwall packer and pressure test the 4-1/2" casing intermittently to locate possible casing failure.
3. Repair casing failure, if any.
4. Restimulate present perforated interval with 3,000 gallons of regular 15% N. E. acid, swab test and place on production.

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

SIGNED R. L. Alworth TITLE District Superintendent DATE 7-14-65

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: