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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
 Superseded by C-102 and C-103
 Effective 1-1-65
 MAY 13 7 54 AM '66

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
State "C" A/c-1	
9. Well No.	
4	
10. Field and Pool, or Wildcat	
Bagley Penn	
12. County	
Lea	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	2. Name of Operator
TEXAS PACIFIC OIL COMPANY	3. Address of Operator
P.O. Box 1069 - Hobbs, New Mexico	4. Location of Well
UNIT LETTER M, 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 12-S RANGE 33-E NMPM.	15. Elevation (Show whether DF, RT, GR, etc.)
4242' GL	12. County
	Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>
TEMPORARILY ABANDONED	

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.

HELD FOR POSSIBLE REMEDIAL WORK.

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

SIGNED Original signed by: Sheldon Ward TITLE Area Superintendent DATE 5-10-66

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: