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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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-2064

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 <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator BRUCE A WILSBANKS	8. Farm or Lease Name SOUTH FOUR LAKES UNIT
3. Address of Operator 3210 SINCLAIR MIDLAND, TEXAS	9. Well No. 4
4. Location of Well UNIT LETTER O , 1980 FEET FROM THE EAST LINE AND 660 FEET FROM THE SOUTH LINE, SECTION 35 TOWNSHIP 11 S RANGE 34 E NMPM.	10. Field and Pool, or Wildcat FOUR LAKES PENN
15. Elevation (Show whether DF, RT, GR, etc.) 4156 DF	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER COMPLETE IN SAN ANDRES & F4. <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>

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.

WE PROPOSE TO SET CAST IRON BRIDGE PLUG AT 5000', THEN PERFORATE 4778' TO 4788'.
ACIDIZE WITH 3000 GALS, SWAB AND TEST.

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

SIGNED *Bruce A Wilsbank* TITLE OWNER DATE 8/28/70

APPROVED BY _____ TITLE SUPERVISOR DISTRICT 1 DATE SEP - 2 1970

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 1 1970

OLIVER NELSON