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HUMBLE OFFICE O. C. C.
 NEW MEXICO OIL CONSERVATION COMMISSION
 JUL 17 12 40 AM '69

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
7. Unit Agreement Name -
8. Farm or Lease Name South Four Lakes Unit
9. Well No. 4
10. Field and Pool, or Wildcat Four Lakes Penn & Dev.
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 <input type="checkbox"/>
2. Name of Operator Humble Oil & Refining Company
3. Address of Operator P. O. Box 1600, Midland, Texas 79701
4. Location of Well UNIT LETTER <u>0</u> , <u>1980</u> FEET FROM THE <u>E</u> LINE AND <u>660</u> FEET FROM THE <u>S</u> LINE, SECTION <u>35</u> TOWNSHIP <u>11-S</u> RANGE <u>34-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4156 DF

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"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input 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.

Request permission to plug and abandon well in the following manner:

Set plug #1 from 10,000 - 9,900 w/25 sx. neat cmt.
 Set plug #2 from 20' to surface w/10 sx. neat cmt.
 Install dry hole marker and clean location.
 Hole to be filled w/mud laden fluid.

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

SIGNED [Signature] TITLE District Services Supervisor DATE 7-16-69
 LNP/mcb
 APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE JUL 18 1969
 CONDITIONS OF APPROVAL, IF ANY: