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HOBBS OFFICE O. C. C.  
NEW MEXICO OIL CONSERVATION COMMISSION  
MAY 27 10 56 AM '66

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. State Oil & Gas Lease No. <i>E-2064</i>
2. Name of Operator <i>Humble Oil &amp; Refining Company</i>		7. Unit Agreement Name -
3. Address of Operator <i>P.O. Box 1600, Midland, Texas 79701</i>		8. Farm or Lease Name <i>South Four Lakes Unit</i>
4. Location of Well UNIT LETTER <i>"I"</i> <i>1980</i> FEET FROM THE <i>South</i> LINE AND <i>1660</i> FEET FROM THE <i>East</i> LINE, SECTION <i>35</i> TOWNSHIP <i>11-S</i> RANGE <i>34-E</i> NMPM.		9. Well No. <i>7</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>4160' D.T.</i>		10. Field and Pool, or Wildcat <i>Four Lakes Penn.</i>
12. County <i>Lea</i>		

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 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.

*Well shut-in. Excessive water production. Possible remedial work being studied.*

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

SIGNED *D. L. Clemmer* TITLE *Agent* DATE *5-25-66*

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: