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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.	
OG-1294	

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		8. Farm or Lease Name
Coastal States Gas Producing Company		Sinclair State
3. Address of Operator		9. Well No.
P. O. Box 2498, Abilene, Texas		4
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER I , 1978.7 FEET FROM THE South LINE AND 663.3 FEET FROM		Wildcat
THE East LINE, SECTION 20 TOWNSHIP 9-S RANGE 33-E NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
4366.2' GL		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"/>	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 JOB <input checked="" type="checkbox"/>	OTHER <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.

SPUD DATE: 3-30-65

April 11, 1965: Ran 164 jts 8-5/8" , 24 & 32#, J-55 Casing set @ 5125'. Cemented w/ 400 sks Class "A" 1:1 Litepoz, 4% gel and 100 sks Class "C" Cement. P-D @ 1:00 a.m. Tested csg w/ 1000# for 30 minutes - held o. k. WOC - 18 hours.

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

SIGNED *Joe R. Howard* TITLE **Production Superintendent** DATE **April 13, 1965**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: