DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65
FILE	Effective 1-1-05
U.S.G.S.	5a. Indicate Type of Lease
LAND OFFICE	State X Fee.
OPERATOR	5. State Oil & Gas Lease No.
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."	
I. OIL GAS WELL OTHER-	7. Unit Agreement Name
2. Name of Operator Sun Cil Company	8. Form or Lease Name State of New Mexico "G"
3. Address of Operator	9. Well No.
Box 2792, (dessa, Texas	10 Field and Bank or William
UNIT LETTER 660 FEET FROM THE LINE AND 7930 FEET FROM	10. Field and Pool or Wildestenated (Moscalero-Field)
THE South LINE, SECTION 35 TOWNSHIP 100 RANGE 3230 NMPM	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County I.e.s.
Check Appropriate Box To Indicate Nature of Notice, Report or Ot NOTICE OF INTENTION TO: SUBSEQUEN	ther Data
PERFORM REMEDIAL WORK PLUC AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE ERILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JQB	
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SEE RULE 1103.	g estimated date of starting any proposed
(n 6-13-65) Out core /1 /337/4388 (01', 19' polomice, scattered fraction oil a vtr, 3' scaley bole, 71' colo 19' blooding oil, 5' shaley bole bleeding oil from top 1 it, 7' polo FFI bleed ore 2 4388/4422 (34', 14' and brown chaley bolomite v 4388/4420 - 701 1420/44 and adding oil. Core /3 4422/4453 (31', 70' roun polo, three poro bleed lime, 8 ft brown bole contacted poro a blacking wtr. 1' man logs 6-14-65 can logs 6-15 & 16-65 cpotted following place in the ell. 25 shounded plus - 3624/3710 25 " " - 2160/2250 25 " " - 1644/1750 35 " " - 350/250 w/10 sls in to of 8-5/8" cs	ding oil. ery scattered bleeding ing wtr top 4, 12 brown lime g w/marker installed.
Note: Verbal permassion runted by Commission office, H 6-15-65.	obbs to plug well on
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
signed	
APPROVED BY TITLE	#32 19 65
CONDITIONS OF APPROVAL, IF ANY:	