NO. OF COPIES RECEIVED			14 Form C-103
DISTRIBUTION			Supersedes Old C+102 and C+103
SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Ellective 1-1-65
FILE		ERVATION COMMISSION	213
U.S.G.S.			Sa. Indicate Type of Lease
LAND OFFICE		77	State X Fee
OPERATOR			5. State Cii & Gas Lease lio.
			
	Y NOTICES AND REPORTS ON POSALS TO CHILL ON TO DEEPEN OR PLUG BOON FOR PERMIT -" (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.)	
Week X week \Bar	OTHER•		7. Unit Agreement Hame
2. Name of Operator	510 Jayle		8, Farm or Lease liame
Cabot Corporation	27/10/		J. R. Thompson
3. Address of Operator			9. Well Ho.
	upply Co., Box 2010,	Hobbs, N. M. 882	240 1
4. Location of Well L 198	80 FEET FROM THE South	330	N.Blingery Penn
THE West LINE, SECTION	N 23 TOWNSHIP 11	RANGE33	MMPM. (
	15. Elevation (Show whether		12. County
	42	65' D. F.	. Lea (
Check A	ppropriate Box To Indicate NTENTION TO:		or Other Data UENT REPORT OF:
		_	_
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUE AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	_
		OTHER	
OTHER	[_]		
17. Describe Proposed or Completed Ope work) SEE RULE 1103.	rations (Clearly state all pertinent deta	ils, and give pertinent dates, inc	luding estimated date of starting any proposed
2. Spotted a 25 3. Spotted a 50 4. Spotted a 25 5. Spotted a 25 6. Spotted a 10 7. Hole was loa	O sx cement plug acres sx cement plug @ 5 O sx cement plug @ 8 O sx cement plug @ 8 O sx cement plug @ 10 O sx cement plug @ staded w/mud-laden flugged & abandoned on	$\frac{1}{2}$ casing stub @ 7 -5/8 casing shoe -5/8 casing stub 3-3/8 casing shown arker. ids.	'485'. @ 3800'. @ 1005'.
16. I hereby certify that the information of	above is true and complete to the best o	of my knowledge and belief. Agent	Date <u>4/3/72</u>
	/	parace programme	· · · · · · · · · · · · · · · · · · ·
APPROVED BY MIN W.	unyan TITLE	U Barn days also the second	OATE
CONDITIONS OF APPROVAL, IF ANY			V