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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
 Supercedes Old  
 C-102 and C-103  
 Effective 1-1-67  
 O. C. C.  
 AUG 15 1 32 PM '67

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	NM 315

## 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 TEXAS PACIFIC OIL COMPANY	8. Farm or Lease Name J. P. Collier
3. Address of Operator P. O. Box 1069 - Hobbs, New Mexico	9. Well No. 3
4. Location of Well UNIT LETTER C, 810 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 10 TOWNSHIP 11-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat N. Bagley Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4266.7' GR	12. County 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 Acidize <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input 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.

- Rig up. Kill well. Pull tubing and pump.
- Run tubing and pkr. Acidize perfs. 9497 - 9507' w/7500 gal. 15% acid.
- Flush w/lse. oil.
- Swab to recover load. Place well back on production.

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

Original Signed by

SIGNED Sheldon Ward TITLE Area Superintendent DATE 8-14-67

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: