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NEW MEXICO OIL CONSERVATION COMMISSION O. C. C.

JAN 17 11 45 AM '67

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

SUNDRY NOTICES AND REPORTS ON WELLS <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 type="checkbox"/> Fee <input checked="" type="checkbox"/>
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		5. State Oil & Gas Lease No. Fee Lease
2. Name of Operator Coastal States Gas Producing Company		7. Unit Agreement Name
3. Address of Operator P. O. Box 235, Midland, Texas 79701		8. Farm or Lease Name McGuffin
4. Location of Well UNIT LETTER F , 2155 FEET FROM THE W LINE AND 1980 FEET FROM THE N LINE, SECTION 29 TOWNSHIP 9S RANGE 33E NMPM.		9. Well No. 1
15. Elevation (Show whether DF, RT, GR, etc.) 4355' GL		10. Field and Pool, or Wildcat Flying "M" (San Andres)
12. County Lea		

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

REMEDIAL WORK:

- 1-10-67: Moved in to perforate "B" zone, 4395-4404' and treat both "A" and "B" zones.
- 1-11-67: POH with tubing and rods. Perforated casing 4395-4404' with 1 JSPF. Ran packer with 49 jts tubing.
- 1-12-67: Ran tubing and set packer at 4200'. Treated all perforations with 4000 gallons 28% Super X acid and 28 ball sealers - 3000 max, av 2300# at 3 BPM.
- 1-13-67: POH with tubing and removed packer. Reran tubing, 143 jts, set at 4426', perf nipple 4411-14', SN 4410'. Put well on pump. To retest after recovery of load oil.

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 Div. Prod. Supt. DATE January 16, 1967

APPROVED BY [Signature] TITLE [Signature] DATE Jan 16 1967

CONDITIONS OF APPROVAL, IF ANY: