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HOBBBS OFFICE & C.C.
NEW MEXICO OIL CONSERVATION COMMISSION

JAN 9 7 43 AM '67

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.	NM 3586

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 Coastal States Gas Producing Company	8. Farm or Lease Name Flying "M" State 21
3. Address of Operator P. O. Box 235, Midland, Texas 79701	9. Well No. 3
4. Location of Well UNIT LETTER <u>P</u> , <u>525</u> FEET FROM THE <u>S</u> LINE AND <u>797</u> FEET FROM THE <u>E</u> LINE, SECTION <u>21</u> TOWNSHIP <u>9</u> RANGE <u>33</u> NMPM.	10. Field and Pool, or Wildcat Flying "M" (San Andres)
15. Elevation (Show whether DF, RT, GR, etc.) 4340.7 GL	12. County Lea

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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: 12-17-66 5:15

12-31-66: Ran 143 joints 4-1/2" casing at 4604'. Cemented with 500 gallons Oil Sperse, 250 sacks 1:1 Posmix .5% CFR2, 10% salt; last 25 sacks with 25 gallons Latex. PD - 5:30 p.m. Tested casing to 1500#, held OK. WOC 24 hours.

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

SIGNED [Signature] TITLE Div. Prod. Superintendent DATE January 4, 1967

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: