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HOBBS OFFICE O. C. C.

NEW MEXICO OIL COMPANY

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. OG 856
7. Unit Agreement Name
8. Farm or Lease Name New Mexico CF State
9. Well No. 1
10. Field and Pool, or Wildcat Indesignated
12. County Lea

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-
2. Name of Operator Humble Oil & Refining Company
3. Address of Operator Box 1600, Midland, Texas
4. Location of Well UNIT LETTER <u>A</u> <u>660'</u> FEET FROM THE <u>N</u> LINE AND <u>660</u> FEET FROM THE <u>E</u> LINE, SECTION <u>33</u> TOWNSHIP <u>10-S</u> RANGE <u>33-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) to be supplied later

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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

MIRU. Spud well in @ 4 pm on 5-17-67. Drld to 358' and ran & set 355' of 11-3/4" OD csg and cmtd w/250 sx reg. cmt w/4% gel and 2% CaCl. Cmt circl. WOC 19-3/4 hours. Test casing w/800 psi for 15 minutes & held ok. Resumed drlg operations.

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

SIGNED <u>R. J. Berry</u>	TITLE <u>Agent</u>	DATE <u>5-19-67</u>
APPROVED BY <u></u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		