NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL COM BROVATION COMMISSION	C-102 and C-103
FILE	TEN MEXICO OIL GOMBERTATION COMMISSION	Effective 1-1-65
U.S.G.S.	Jun 28 8 ga AM °67	5a. Indicate Type of Lease
LAND OFFICE	JUN CO OU MA OF	State Fee
OPERATOR	<del>-</del>	5. State Oil & Gas Lease No.
OF ERATOR		K-119
CLINIC	DDV NOTICES AND DEPORTS ON WELLS	anamanah -
OD NOT USE THIS FORM FOR I	DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ACTION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1.	COUNTRY TO TERMINE TO THE TOTAL TOTA	7. Unit Agreement Name
OIL GAS WELL	OTHER-	
2. Name of Operator	VIII-N-	8. Farm or Lease Name
Stelts & Company -	Clark	Schie "B"
3. Address of Operator		9. Well No.
c/o Oil Reports & G	as Services, Box 763, Hobbs, New Mexico	1
4. Location of Well		10. Field and Pool, or Wildcat
P	660 FEET FROM THE South LINE AND 660 FEET	Undes. North Bagley
UNIT LETTER,	FEET FROM THE DOUGH LINE AND OF FEET	FROM TITITITITITITITITITITITITITITITITITITI
THE East	tion 5 township 11 S RANGE 33 E	
THE DESC LINE, SEC	TION TOWNSHIP RANGEN	MPM: ()
	15. Elevation (Show whether DF, RT, GR, etc.)	12, County
		Les
16. Check	Appropriate Boy To Indicate Notice of Nation D	Other Date
	k Appropriate Box To Indicate Nature of Notice, Report or	
NOTICE OF	SUBSEQU	ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
OTHER		
17. Describe Proposed or Completed	Operations (Clearly state all pertinent details, and give pertinent dates, inclu	ding estimated date of starting any proposed
work) SEE RULE 1 103.		, , , , , , , , , , , , , , , , , , , ,
Cemented	4 1/2" 11.6# N-80 casing at 10,510 with 350 sa	cks 50/50 Pozmix
	gel with 8# salt per sack and 200 sacks 50/50	
	salt per sack and 3/4% CFR-2. Plug down 11:50	
	10 hours, released pressure and ran temperatu	
	60. WOC 48 hours and pressure tested casing w	
	test 0.K.	I'm asooy I'm Jo
. mrimees	vebu vere	
10 Thombu godiffy that it is the	on changing true and complete to the book of the first of	
10.1 nereby certify that the informati	on above is true and complete to the best of my knowledge and belief.	
A + X +	+	
SIGNED / MU	TITLE Agent	DATE 6/27/67

- TITLE

Sign of the control o

DATE \_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: