| NO. OF COPIES RECEIVED | HOBBS OFFICE O. C. C. | Form C-103 Supersedes Old |
|---|---|---|
| DISTRIBUTION | | C-102 and C-103 |
| SANTA FE | NEW MEDICO DIL CONSEPPIATON COMMISSION | Effective 1-1-65 |
| FILE | | 5a. Indicate Type of Lease |
| U.S.G.S. | | State Fee. |
| LAND OFFICE | | 5. State Oil & Gas Lease No. |
| OPERATOR | | |
| SUL (DO NOT USE THIS FORM FOI USE "APPL | NDRY NOTICES AND REPORTS ON WELLS R PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. IGATION FOR PERMIT | 7. Unit Agreement Name |
| OIL CAS WELL | OTHER- | 8. Farm or Lease Name |
| 2. Name of Operator | | Nancy Trow et al |
| Coastal States Gas | Producing Company | 9. Well No. |
| 3. Address of Operator | | 2 |
| P. O. Box 235, Mic | dland, Texas 79701 | 10. Field and Pool, or Wildcat |
| 4. Location of Well | 793.9 FEET FROM THE BOUTH 1856.6 FEET FROM | Undes. Flying M (SA) |
| | ECTION FEET FROM THE CINE AND SECTION 29 TOWNSHIP 98 RANGE 33ENMPM. | |
| | 15. Elevation (Show whether DF, RT, GR, etc.) 4334 ¹ GL | 12. County Lea |
| | eck Appropriate Box To Indicate Nature of Notice, Report or Oth DF INTENTION TO: SUBSEQUENT | er Data REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. | ALTERING CASING |
| OTHER | ted Operations (Clearly state all pertinent details, and give pertinent dates, including | estimated date of starting any proposed |

work) SEE RULE 1105.

<u>SPUD DATE:</u> 7-15-67 6 p.m. Ran 9 jts, 8-5/8", 32#, Cond "B" casing at 279'. Cemented with 200 sx Class "C", 2% CaCl. PD at 2 a.m. WOC 14 hours. Tested casing to 1000#, held OK.

CASING WAS CEMENTED WITH OPTION NO. 2 AS FOLLOWS:

1. Volume of slurry - 242 cu. ft.

- 2. Lone Star Class "C" cement with 2% CaCl.
- 3. Approximate temperature of slurry 92°.
- 4. Estimated minimum formation temperature 97°.
- 5. Estimate of cement strength at time of testing 1020# per sq. inch.
- 6. Actual time cement in place prior to starting cement test 14 hours.

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

| SIGNED De CHoward | TITLE Div. Prod. Supt. | DATE July 18, 1967 |
|---------------------------------|------------------------|--------------------|
| | | DATE |
| CONDITIONS OF APPROVAL, IF ANY: | TITLE | |