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NEW MEXICO OIL CONSERVATION COMMISSION C. C.

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

OCT 1 1 33 PM '67

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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 Stolts & Company - Clark	8. Farm or Lease Name Lulu
3. Address of Operator c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER N 656 FEET FROM THE South LINE AND 1985 FEET FROM THE West LINE, SECTION 4 TOWNSHIP 11S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Undes. North Bagley
15. Elevation (Show whether DF, RT, GR, etc.) 4294 GL	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 ☐

SUBSEQUENT REPORT OF:

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

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.

Spudded 17 1/2" hole 9/21/67. Cemented 13 3/8" 49# casing at 380 feet with 400 sacks. Cement circulated. Plug down 9:00 PM 9/21/67. WOC 18 hours and pressure tested casing with 600# for 30 minutes, test O.K.

Cemented 8 5/8" 24# & 32# casing at 3752 with 200 sacks. Plug down 5:30 PM 9/25/67. WOC 18 hours and pressure tested casing with 1,000# for 30 minutes, test O.K.

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

SIGNED A. L. Smith TITLE Agent DATE 10/4/67

APPROVED BY [Signature] TITLE DATE 00

CONDITIONS OF APPROVAL, IF ANY: