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LAND OFFICE		
OPERATOR		

# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease  
State ☐ Fee ☒

5. State Oil & Gas Lease No.  
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7. Unit Agreement Name  
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8. Farm or Lease Name

Wright A

9. Well No.

1

10. Field and Pool, or Wildcat

Undesignated

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 GAS ☐ WELL OTHER ☐

2. Name of Operator

McGrath & Smith, Inc.

3. Address of Operator

310 W. Texas Suite 418, Midland, Texas 79701

4. Location of Well

UNIT LETTER B, 1980 FEET FROM THE E LINE AND 660 FEET FROM

THE N LINE, SECTION 26 TOWNSHIP 9S RANGE 34E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

GL 4191

KB 4203

## 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 JOB ☒

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

This well was drilled to TD 9895 on 8-27-68 (7-7/8" hole)  
Cmtd. 5½-17# Csg. at 9895' with 400 sx. Incor 2% gel. Plug down 11:30 p.m., 8-27-68. Tested  
5½ with 2500 psi. Held OK. Top cmt. 8100'. Perf. 9857-9866. A/1000 gals. Ran 2-3/8 EVE  
8 rd N80 Tubing to 9584 with Guiberson L-30 Pkr. set at 9584. Completed 9-7-68. Installed  
Kobe Ppg. equipment and began testing 9-13-68.

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

SIGNED J.B. Taylor

TITLE Engineer

DATE 3-4-69

APPROVED BY [Signature]

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: