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LAND OFFICE	
OPERATOR	

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

NEW MEXICO OIL CONSERVATION COMMISSION

SEP 05 1968

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name
L. D. Tankersley

9. Well No.
#2

10. Field and Pool, or Wildcat
Vada (Penn)

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- **Dry**

2. Name of Operator
MIDWEST OIL CORPORATION

3. Address of Operator
1500 WILCO BLDG., MIDLAND, TEXAS 79701

4. Location of Well
UNIT LETTER **D** **660** FEET FROM THE **North** LINE AND **660** FEET FROM
THE **West** LINE, SECTION **30** TOWNSHIP **9-8** RANGE **34-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
4317 DF

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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <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 11C3.

8-3-68: Spudded. Ran 8 jts. 11-3/4" Spiraveld csg. set @ 332' w/325 sx Class 'C' w/2% gel. Cmt circd. WOC 24 hrs. Tstd. @ 1000# psi for 30 min. Tstd. OK

8-8-68: Ran 125 jts. 8-5/8" 24# & 32# J-55 csg. set @ 4015 w/450 sx Incor. WOC 24 hrs. Tstd @ 800# for 30 min. Tstd. OK

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

SIGNED Sarah Lynn Turner TITLE **PRODUCTION CLERK** DATE **9-3-68**

APPROVED BY [Signature] TITLE _____ DATE **9-3-68**

CONDITIONS OF APPROVAL, IF ANY: