NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		5a. Indicate Type of Lease
U.S.G.S.	-	State 🔭 Fee
OPERATOR		5. State Oil & Gas Lease No.
OT EXX. OX		K 2728
SUNE	DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ACTION FOR PERMIT OF FORM C-101) FOR SUCH PROPOSALS.)	
1.		7. Unit Agreement Name
2. Name of Operator	OTHER-	8. Farm or Lease Name
TEXAS PACIFIC OIL (10., INC.	Symble State 9. Well No.
P. O. Box 1069 - He	obbs, New Mexico 88240	10. Field and Pool, or Wildcat
4. Location of Well	2086 FEET FROM THE NORTH LINE AND 554 F	
THE WOSS LINE, SEC	CTION 16 TOWNSHIP 10-8 RANGE 34-8	NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4214' GR	· · · · Other Date
	k Appropriate Box To Indicate Nature of Notice, Repor	EQUENT REPORT OF:
PERFORM FEMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORAR LY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JQB	
	OTHER	
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.		
1. MIRV. Pull roo	is, pump and tubing.	
		dund today budge
2. Set CIBP @ 9900	0'. Spot 35' cement plug. Displaced hole w	// Myd 18660 Dring.
3. Cut off 5-1/2"	casing @ free point (4023'). Pulled 5-1/2"	casing.
4. Circulated w/m	ud laden brine.	
5. Spot 40 sk com	ent plug across top of 5-1/2" casing @ 4023.	
•		
6. Cut off and pub top of 8-5/8".	lled 8-5/8" casing @ 1021'. Spotted 70 sk c	ement plug across
7. Spotted 70 sk	cement plug @ 435', across 12-3/4" casing sh	106.
8. Cut off wellher	ad and capped w/10 sk coment plug. Installe	d dry hole marker.
		·
	• tion above is true and complete to the best of my knowledge and belief.	
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Original Signary Lloyd Wr	AVAA VIIDATIBTARAARI	DATE 9-21-73
0.0	P	· Carrier and the same
APPROVED B	unyan TITLE	DATE
CONDITIONS OF APPROVAL, IF A	ANY:	