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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

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

NOV 1 3 39 1968

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. OG-4632
7. Unit Agreement Name
8. Farm or Lease Name MOY State
9. Well No. 1
10. Field and Pool, or Wildcat Undesignated Penn.
12. County Lee

<p>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.)</p>	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Monsanto Company	8. Farm or Lease Name MOY State
3. Address of Operator 101 N. Marlenfeld, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 30 TOWNSHIP 10s RANGE 34E NMPM.	10. Field and Pool, or Wildcat Undesignated Penn.
15. Elevation (Show whether DF, RT, GR, etc.) Surf elevation 4226' RKB	12. County Lee

<p>16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data</p>	
<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>

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.

10/24/68: At total depth of 10,020', set 9998' of 5 1/4" OD 17# N-80 & J-55 86LT6C Casing. Cemented w/300 sx Class "C" cement. Plug down 12:43 a.m. WOC 24 hrs and tested w/1000 psi for 30 minutes, held okay.

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

SIGNED *A. W. Wood* TITLE **Dist. Prod. Supt.** DATE **Nov. 1, 1968**

APPROVED BY *[Signature]* TITLE **SECRETARY** DATE **1968**

CONDITIONS OF APPROVAL, IF ANY: