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NEW MEXICO OIL CONSERVATION COMMISSION

Dec 3 5 25 AM '68

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-2443
7. Unit Agreement Name
8. Farm or Lease Name MGP "A" State
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>
2. Name of Operator MONSANTO COMPANY
3. Address of Operator 101 North Marienfeld, Midland, Texas 79701
4. Location of Well UNIT LETTER J 2080 FEET FROM THE South LINE AND 2080 FEET FROM THE East LINE, SECTION 30 TOWNSHIP 10-S RANGE 34-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) Furnish Later

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 checked="" 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 1103.

**Spudded 15" hole 11-27-68 at 5:00 p.m.
Set 13 jts 11 3/4" 42# H-40 ST&C casing @ 363' in 15" hole and cemented to surface with 400 sx Class "H" cement 2% D-33. Plug down 6:00 a.m., 11-28-68. WOC 24 hrs and tested with 800# for 30 minutes, held OK.**

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 **12-2-68**
APPROVED BY *[Signature]* TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: