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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
K-3836

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"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Charles B. Read	State "A"
3. Address of Operator	9. Well No.
P. O. Box 2126, Roswell, New Mexico 88201	1
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER C, 660 FEET FROM THE North LINE AND 2097' FEET FROM	North Bagley, Lower Penn (Undesignated)
THE West LINE, SECTION 18 TOWNSHIP 11S RANGE 33E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4316.3 GL	Lea

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"/>	

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.

2-23-69: Ran 61 jts of 8 5/8", 24# & 29 jts of 8 5/8", 32#, J-55, FWPS casing, 3760.41' set @ 3756' RKB. Cmt w/250 sx Incor Poz, 2% Gel, 8# salt, followed by 100 sx Incor w/2% Ca Cl & 8# salt. Plug down at 7:45 AM. WOC 18 hrs. Press test to 1500# for 30 min. Test OK.

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

SIGNED [Signature] TITLE Agent DATE Feb. 24, 1969

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: