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NEW MEXICO OIL CONSERVATION COMMISSION

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

Corrected Report

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. <i>OG-5210-2</i>

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 ☐	7. Unit Agreement Name
2. Name of Operator <i>Tenneco Oil Company</i>	8. Farm or Lease Name <i>State "W"</i>
3. Address of Operator <i>Box 1031, Midland, Texas 79701</i>	9. Well No. <i>2</i>
4. Location of Well UNIT LETTER <i>P</i> <i>660</i> FEET FROM THE <i>south</i> LINE AND <i>810</i> FEET FROM THE <i>east</i> LINE, SECTION <i>31</i> TOWNSHIP <i>11-S</i> RANGE <i>34-E</i> NMPM.	10. Field and Pool, or Wildcat <i>Undesignated</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>4205 GR</i>	12. County <i>Lea</i>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☒	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.

4-21-69

Run 310 Jts. 5 1/2" OD, 17#, J-55 + N-80 casing to 10,320'. Cntd with 200 sf 50-50 Incon Permut w/ 690 gel + 7# salt / sf. Tailed in w/ 100 sf class "H" w/ Latex (total 300 sf). PD @ 5:15 P.M. CST 4-21-69. Bumped plug w/ 2200#. Top of cement at 8280 by temp. survey. WOC 24 hrs. Tested csg w/ 2000# for 30 mins. Held OK. Prepare to complete.

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

SIGNED *E. Smith* TITLE *Sr Prod Clerk* DATE *5-20-69*
APPROVED BY *[Signature]* TITLE *Commissioner* DATE *5-20-69*
CONDITIONS OF APPROVAL, IF ANY: