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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 ☒ Fee ☐

5. State Oil & Gas Lease No.  
OG-5210-2

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO GRILL 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<br><u>Tenneco Oil Company</u>   | 8. Farm or Lease Name<br><u>State "W"</u> |
| 3. Address of Operator<br><u>P.O. Box 1031, Midland, Texas 79701</u>  | 9. Well No.<br><u>2</u>                   |
| 4. Location of Well<br>UNIT LETTER <u>P</u> , <u>660'</u> FEET FROM THE <u>South</u> LINE AND <u>810'</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>31</u> TOWNSHIP <u>11-S</u> RANGE <u>34-E</u> NMPM. | 10. Field and Pool, or Wildcat            |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><u>4205 GR</u>   | 12. County<br><u>Lea</u>                  |

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"/> | REMEDIAL WORK <input type="checkbox"/>                         |
| TEMPORARILY ABANDON <input type="checkbox"/>   | COMMENCE DRILLING OPNS. <input type="checkbox"/>               |
| PULL OR ALTER CASING <input type="checkbox"/>  | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> |
| OTHER <input type="checkbox"/>                 | OTHER <input type="checkbox"/>                                 |
| PLUG AND ABANDON <input type="checkbox"/>      | ALTERING CASING <input type="checkbox"/>                       |
| CHANGE PLANS <input type="checkbox"/>          | PLUG AND ABANDONMENT <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.

3-24-69

Set & Cmt'd 8 5/8" OD, 32", J-55 Csg @ 4075'  
w/ 850 sg 50-50 Incor Poz w/ 6% gel & 7% salt  
per sg followed w/ 150 sg Incor neat w/ 2% CaCl<sub>2</sub>  
P.D. 8:55 AM CST 3-24-69. Pressure tested casing  
to 1700 PSI for 5 min. after WOC 8 hrs. Held OK.  
Mifing temperature 68°. Formation temperature 100°.  
Estimated compressive strength after WOC 8 hrs.  
is 900 PSI.

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

SIGNED A.E. Smith TITLE Sr. Prod. Clerk DATE 4-8-69

APPROVED BY Leslie V. Clement TITLE Director DATE 4-8-69  
CONDITIONS OF APPROVAL, IF ANY: