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NEW MEXICO OIL CONSERVATION COMMISSION

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

APR 23 9 19 AM '69

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name	
2. Name of Operator <b>Stoltz &amp; Company</b>	8. Farm or Lease Name <b>Doris</b>	
3. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>	9. Well No. <b>1</b>	
4. Location of Well UNIT LETTER <b>C</b> <b>553.9</b> FEET FROM THE <b>South</b> LINE AND <b>1873.9</b> FEET FROM THE <b>East</b> LINE, SECTION <b>18</b> TOWNSHIP <b>11S</b> RANGE <b>33E</b> NMPM.	10. Field and Pool, or Wildcat <b>North Bagley</b>	
	15. Elevation (Show whether DF, RT, GR, etc.) <b>4311 GR</b>	12. County <b>Lea</b>

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 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.

**Cemented 4 1/2" N-80 11.6# casing at 10,420 feet with 550 sacks 50/50 Incor Pozmix, 2% gel, 8# salt per sack. Plug down 10 PM 4/15/69. WOC 48 hours. Test casing with 2,000#, test O.K.**

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

SIGNED *A. L. Smith* TITLE Agent DATE 4/22/69

APPROVED BY *[Signature]* TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: