<o. copies="" of="" received<="" th=""><th></th><th></th></o.>		
DISTRIBUTION		
SANTAFE		
FILE		
U.S.G.S.		-
LAND OFFICE		
OBERATOR	T	

Form C-103

DISTRIBUTION	entals of Fice 9. 9. 9.	Supersedes Old C-102 and C-103
SANTAFE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	NEW MEXICO OIL CONSERVATION COMMISSION	
U.S.G.S.	OUN 3 7 G F	5a. Indicate Type of Lease
LAND OFFICE		State 🗶 Fee.
OPERATOR		5, State Oil & Gas Lease No.
		L=541
SL (DO NOT USE THIS FORM F	JNDRY NOTICES AND REPORTS ON WELLS OR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. PLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
USE "API	PLICATION FOR PERMIT -** (FORM C-101) FOR SUCH PROPOSALS.)	7, Unit Agreement Name
OIL GAS WELL	7	7, 0.111 11,000
2. Name of Operator	J OTHER-	8. Farm or Lease Name
Sur	a Uil Company	New Mexico "S" State
3. Address of Operator		9. Well No.
P.	0.Box 2792, Odessa, Texas 79760	1
4. Location of Well		10. Field and Pool, or Wildcat
The state of the s		Undesignated
UNIT LETTER	FEET FROM THE LINE AND FEET FROM	
North	SECTION 32 TOWNSHIP 98 RANGE 37 E NMPM.	
LINE,	SECTION NAME AND AMPAIR	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3971' Gr.	Lea
16. Ch	eck Appropriate Box To Indicate Nature of Notice, Report or Otl	her Data
	• • • •	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
OTHER		
16 December December Comple	sted Operations (Clearly state all pertinent details, and give pertinent dates, including	estimated date of starting any proposed
work) SEE RULE 1705.	ned Operations (Creatly State are pertinent decasts, and give pertinent dates, including	cassimated date of starting disy proposed
Well spudded 7 p.	.m. 6-25-69. On 6-26-69 ran 9 jts. 8 5/8" OD, 20# c	essing seated at 4691.
	o sks. Class C, 2% CaCl. Circulated approx. 20 sks	
Option 2: Mixing	temperature est. 826F; est. min. formation tempera	ture 670; est. strength
	550-900 psi. In place 10g hours prior to test. Tes	
800#, 30 minutes,		•
	•	
18. I hereby certify that the infor		
	mation above is true and complete to the best of my knowledge and belief.	
De pe	Sacraga	
SIGNED	mation above is true and complete to the best of my knowledge and belief.  TITLE Assit District Sum rintend	ent DATE 6-27-69
/6-12	Sacraga	
SIGNED	Sacraga	lent DATE 6-27-69
SIGNED	Sacraga	