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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-5703
7. Unit Agreement Name -
8. Farm or Lease Name State "F"
9. Well No. 1
10. Field and Pool, or Wildcat N. Bagley L. Penn
12. County Lea

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- Dry Hole
2. Name of Operator Read & Stevens
3. Address of Operator P.O. Box 2126, Roswell, New Mexico 88201
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>510</u> FEET FROM THE <u>East</u> LINE, SECTION <u>13</u> TOWNSHIP <u>11S</u> RANGE <u>32E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4319' GL

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
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.

To plug and abandon in the following manner:

10 sx cement plug @ 0 - 10'
25 sx cement plug @ 300 - 400'
" 1400 - 1500' (or in stub of 8 5/8")
" 3600 - 3700'
" 4850 - 4950'
" 7090 - 7190'
" 8300 - 8400'
" 9700 - 9800'

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 10/29/69
APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT I DATE 11/3/69
CONDITIONS OF APPROVAL, IF ANY: