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NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 23 1969

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
K-5703

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Read & Stevens	State "F"
3. Address of Operator	9. Well No.
P. O. Box 2126 , Roswell, New Mexico	1
4. Location of Well	10. Field (and Pool, for Wildcat)
UNIT LETTER A , 660 FEET FROM THE North LINE AND 510 FEET FROM	(Undesignated)
THE East LINE, SECTION 13 TOWNSHIP 11S RANGE 32E NMPM.	N. Bagley L. Penn
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4319' GL	Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

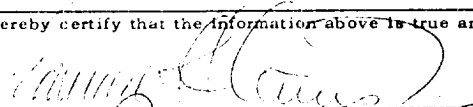
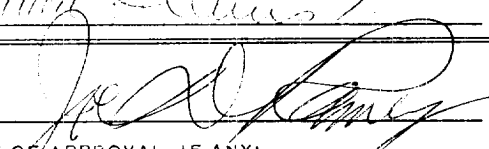
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input checked="" type="checkbox"/>

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.

9-15-69: Spudded @ 8:00 P.M.

9-16-69: Ran 9 jts, 389.09' of 12 3/4", 32#, FWPS csg, set @ 385' RKB.
Cmt w/350 sx of class H w/2% CaCl. Plug down @ 4:30 A.M.
9-16-69. Cmt circ. Test to 1500 PSI for 30 min - Test OK.
WOC 18 hrs.

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

SIGNED 	TITLE Agent	DATE 9-19-69
APPROVED BY 	TITLE SUPERVISOR DISTRICT	DATE 9-19-69
CONDITIONS OF APPROVAL, IF ANY:		