NO. OF COPIES RECEIVED			Form C-103	ł	
DISTRIBUTION				Supersedes Old	
SANTAFE	NEW MEXICO OIL CONSERVATION COMMISSION		C-102 and C-103 Effective 1-1-65		
FILE	_				
U.S.G.S,			5a. Indicate Ty	pe of Lease	
OPERATOR	-		State X	Fee	
	_1		5. State Oil & C	Gas Lease No.	
SUND	RY NOTICES AND DEPORTS	ON WELLS	mmm	mmm	
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.			7, Unit Agreeme	ent Name	
2. Name of Operator	OTHER-				
NATURAL ENERGIES, INC.				8. Farm or Lease Name	
3. Address of Operator				Lario State	
c/o Hobbs Pipe & Supply Co., P. O. Box 2010, Hobbs, N. M. 88240			9. Well No.		
4. Location of Well				#1 10. Field and Pool, or Wildon	
UNIT LETTER D 660 FEET FROM THE North LINE AND 510 FEET FROM				Ban II Donn	
			7777777 MON	mmm	
THE West LINE, SECT	10N 6 TOWNSHIP 9-	S RANGE 33-E			
mmmmmm					
	15, Elevation (Show whet		12, County		
		UK	<u>Lea</u>		
Check	Appropriate Box To Indicate	Nature of Notice, Report or	Other Data		
NOTICE OF I	NTENTION TO:	SUBSEQUE	ENT REPORT OF	F:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	X <sub>1</sub>		_	
TEMPORARILY ABANDON	TEGG AND ABANDON [	REMEDIAL WORK  COMMENCE DRILLING OPNS.		FRING CASING	
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	PLUG	AND ABANDONMENT	
		OTHER	_		
OTHER					
17. Describe Proposed or Completed O	perations (Clearly state all pertinent	desails and nice making the state of the	1		
work) SEE RULE 1103.	printed (steam) state att pertinent (	retuits, and give pertinent dates, includ	ling estimated date of	starting any propose	
2. Load note w/ 3. Spot a 25 sx 4. Spot a 35 sx 5. Spot a 35 sx 6. Spot a 35 sx 7. Spot a 10 sx	mud-laden fluids. plug at casing stub, a plug in and out of the plug at stub of 8-5/8 plug in and out of bas plug at surface & erec	e base of 8-5/8 intermed casing, approx. 1000'.	liate, 3626'.	ì	
·	12/			•	
1116		andre before		hother How	
ZH KUKK KE	Maegie, Coma			· , , , ,	
18. I hereby certify that the information	above is true and complete to the bes	t of my knowledge and belief.			
SIGNED Stanley Sai	Kin TITLE	AGENT	DATE5/	/2/73	
			,		

CONDITIONS OF APPROVAL, IF ANY: