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LAND OFFICE		
OPERATOR		

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 type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name
Starman 684 LTD
9. Well No.
1
10. Field and Pool, or Wildcat
Vada Penn
12. County
Lea

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-OPEN OR FILL BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - A-1 (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
The Maurice L. Brown Co.

3. Address of Operator
Suite 1500, KSB&T Bldg., Wichita, Kansas 67202

4. Location of Well
UNIT LETTER H 1980 FEET FROM THE North LINE AND 660 FEET FROM
THE East LINE, SECTION 4 TOWNSHIP 9-S RANGE 35-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 JOBS <input 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 1503.

Install pumping equipment. Change well from gas flowing to pumping.

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

SIGNED Wm. Groesbeck TITLE District Engineer DATE 3-25-77

APPROVED BY _____ TITLE _____ DATE APR 21 1977

CONDITIONS OF APPROVAL, IF ANY: