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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-101
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☐
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEPLEN 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 COASTAL OIL & GAS CORPORATION	8. Farm or Lease Name MARR
3. Address of Operator P.O. BOX 235 MIDLAND, TX	9. Well No. #3
4. Location of Well UNIT LETTER I 1980 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 33 TOWNSHIP 9S RANGE 37E NMFM.	10. Field and Pool, or Wildcat WEST SAWYER FIELD
15. Elevation (Show whether DF, RT, GR, etc.)	12. County LEA

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 ☐

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.

Dug out cellars to expose outlets of bradenheads from the first string of pipe cemented in well and all subsequent heads to and including the tubing head. Built risers from connection on each well head with second valve on top of surface, to be able to check for pressure. Work performed has been inspected by Oil Conservation Representative, A. A. (Tony) Plattsmie

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

SIGNED CO Lat

TITLE Production Foreman

DATE APRIL 30, 1982

APPROVED BY A. A. Plattsmie

TITLE OIL & GAS INSPECTOR

DATE MAY 12 1982

CONDITIONS OF APPROVAL, IF ANY: