

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. 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 DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Coastal Oil & Gas Corporation	8. Farm or Lease Name Santa Fe
3. Address of Operator P. O. Box 235, Midland, Texas 79702	9. Well No. 6-2
4. Location of Well UNIT LETTER <u>0</u> <u>560</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>33</u> TOWNSHIP <u>9-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Whdcat West Sawyer (SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3952' GL	12. County Lea

16. 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 ☐
☐

SUBSEQUENT REPORT OF:

REMEDIATION WORK ☐
 COMMENCE DRILLING OPS. ☒
 CASING TEST AND CEMENT JOBS ☒
 OTHER ☐

ALTERING CASING ☐
 PLUG AND ABANDONMENT ☐

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.

9-25-81 Spudded @ 9:30 P.M. Drill to 475'; prepare to run to cement fresh water csng.

9-27-81 Rig up casing crew; pick up and run 11 jnts. 8-5/8" K-55 casing to 465' KB. Cement with 200 sx. class "C" cement. Circulate 35 sx. TOC: Surface. Test to 1000# - held O.K.

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

SIGNED Robin Stephens TITLE Production Analyst DATE 11-18-81

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: