

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. V 1117

**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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Manzano Oil Corporation	8. Farm or Lease Name Sunburst A State Com.
Address of Operator P.O. Box 571 Roswell, NM 88201	9. Well No. 1
Location of Well UNIT LETTER I, 1874 FEET FROM THE South LINE AND 766 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 11S RANGE 33E NMPM.	10. Field and Pool, or Wildcat North Bagley
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 <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 Change name of well <input checked="" type="checkbox"/>

## SUBSEQUENT REPORT OF:

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

7. 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.

Change well name from Sunburst State Com. #1 to  
Sunburst A State Com. #1

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

SIGNED Charles W. Hicks TITLE Vice-President DATE Oct. 23, 1984

ORIGINAL SIGNED BY JERRY TEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE \_\_\_\_\_

DATE OCT 25 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 24 1984

O.C.D.  
HOBBS OFFICE