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NEW MEXICO OIL CONSERVATION COMMISSION

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

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator Tom L. Ingram		5. State Oil & Gas Lease No.
3. Address of Operator POB 1757, Roswell, New Mexico 88201		7. Unit Agreement Name
4. Location of Well UNIT LETTER F 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 29 TOWNSHIP 8S RANGE 37E NMPM.		8. Farm or Lease Name Harry L. Hayes
		9. Well No. 2
		10. Field and Pool, or Wildcat Allison-Penn
15. Elevation (Show whether DF, RT, GR, etc.) GL 4042		12. County Roosevelt

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:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
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.

9/16/74: Verbal approval obtained from John Runyan - NMOCC

Set CIBP @ 9000'. Put 35 sack cement plug on top. Cut 5 1/2" casing @ 5000' and pull. Put 100' plug in & out of stub of 5 1/2". Put 100' plug in and out of base of 8-5/8 @ 4220. Put 10 sack plug @ surface with marker. Mud laden brine to be used between all plugs. Clean location.

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

SIGNED Tom L. Ingram TITLE Operator DATE 11/14/74

APPROVED BY Joe D. Ramey TITLE Dist. I. Supv. DATE

CONDITIONS OF APPROVAL, IF ANY: