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NEW MEXICO OIL CONSERVATION COMMISSION
 HOURS OFFICE G. C. C.
 JAN 4 3 11 PM '66

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. NM 682
7. Unit Agreement Name J
8. Farm or Lease Name Atlantic-State
9. Well No. 4-5
10. Field and Pool, or Wildcat Allison Penn
12. County Roosevelt

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"/>
2. Name of Operator Sam Boren
3. Address of Operator Box 953, Midland, Texas
4. Location of Well UNIT LETTER J, 1880 FEET FROM THE East LINE AND 1980 FEET FROM THE South LINE, SECTION 32 TOWNSHIP 8S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4024 GL

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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 1103.

We propose to plug as follows: 25 sx cement @ Penn; 25 sx @ Abo; 25 sx @ Tubbs; 25 sx @ Glorieta; 25 sx in and out of shoe joint @ 4300'; 25 sx @ San Andres; 25 sx @ Yates, 25 sx in and out of service casing @ 400'; and 10 sx to surface.

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

SIGNED <i>E. J. Smith</i>	TITLE Agent	DATE 12/30/65
APPROVED BY <i>[Signature]</i>	TITLE <i>Regional Director</i>	DATE JAN 5 1966
CONDITIONS OF APPROVAL, IF ANY:		