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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Temp. Abnd.	7. Unit Agreement Name
2. Name of Operator El Chorro Exploration, Inc.	8. Firm or Lease Name Ainsworth
3. Address of Operator c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER 11 1980 FEET FROM THE North LINE AND 660 FEET FROM West LINE, SECTION 17 TOWNSHIP 8 S RANGE 35 E NMPM.	10. Field and Pool, or Wildcat Undes. (Milnesand-SA)
15. Elevation (Show whether DF, RT, GR, etc.) 4222 GL	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 ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐

OTHER **Change operator** ☒

SUBSEQUENT REPORT OF:

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

11. 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.

Operator changed from Frankfort Oil Company to El Chorro Exploration, Inc.

It is proposed to plug & abandon as follows:

Spot 25 sacks across perms 4558-4669.
Spot 25 sacks across 4 1/2" casing shot point at 3600.
Spot 25 sacks across base of Salt at 2680.
Spot 25 sacks across top of Salt at 2210.
Spot 25 sacks across 3 5/8" casing shoe at 362.
10 sacks in top with regulation marker.

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

SIGNED **A. L. Smith** TITLE **Agent** DATE **May 11, 1965**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: