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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  Fee

5. State Oil & Gas Lease No.  
E-8875

**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  GAS WELL  OTHER

2. Name of Operator  
Joseph I. O'Neill, Jr.

3. Address of Operator  
410 West Ohio, Midland, Texas 79701

4. Location of Well  
UNIT LETTER N, 1980 FEET FROM THE West LINE AND 660 FEET FROM  
THE South LINE, SECTION 16 TOWNSHIP 8S RANGE 36E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name  
State "L"

9. Well No.  
2

10. Field and Pool, or Wildcat  
Prairie San Andres, S.

15. Elevation (Show whether DF, RT, GR, etc.)  
4118 DF

12. County  
Roosevelt

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"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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.

Plan to plug and abandon as soon as possible.

*Expires 10/1/75*

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

SIGNED E. J. Anderson TITLE Dria & Prod. Supt. DATE 10-28-74

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_