

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease
State ☒ Fee ☐
3. State Oil & Gas Lease No.
OG-1395

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REFINISH OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☐ OTHER- Injection Well	7. Unit Agreement Name Todd Lower S/A Unit
2. Name of Operator MURPHY OPERATING CORPORATION	8. Form or Lease Name Todd Lower S/A Unit Section 35
3. Address of Operator P. O. Drawer 2648, Roswell, NM 88202-2648	9. Well No. 1
4. Location of Well UNIT LETTER <u>A</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>35</u> TOWNSHIP <u>7 South</u> RANGE <u>35 East</u> N.M.P.M.	10. Field and Pool, or Whicat Todd Lower S/A Assoc.
15. Elevation (Show whether DF, RT, GR, etc.) 4185' DF	12. County Roosevelt

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	
OTHER _____		OTHER <u>convert to injection well</u>	

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.

Conversion to injection approved by OCD Order No. WFX-571 dated May 26, 1988.

6-2-88 TIH w/3962' (119 jts.) 2-1/16" 3.25# J-55 ceramic-lined tubing and Baker AD-1
to packer. Set @ 3972' KB. Load casing annulus w/100 bbls. inert (packer) fluid
6-3-88 and pressure test per attached chart. Install wellhead and begin injection.

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

SIGNED Melinda K. Hickman TITLE Production Supervisor DATE August 24, 1988
Melinda K. Hickman

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: