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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-3935
7. Unit Agreement Name
8. Farm or Lease Name N. M. "A7" ST.
9. Well No. 15
10. Field and Pool, or Wildcat Chaveroo San Andres
12. County Roosevelt

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	
2. Name of Operator Sun Oil Company	
3. Address of Operator P. O. Box 1861, Midland, Texas 79701	
4. Location of Well UNIT LETTER P , 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 34 TOWNSHIP 7-S RANGE 33E N.M.P.M.	
15. Elevation (Show whether DF, RT, GR, etc.) DF 4415'	

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 type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/> RTP	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 JOBS <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.

9-5-74: MIRU Expert WS. Ran rods to place TA well back on production.
Ran 1-1/4" Insert Pump & return to production.

9-6-74: Pump 37.0 BO & 2 BW w/72.5 MCF in 24 hours.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNED <u>Charles Gray</u>	TITLE <u>Proration Analyst</u>	DATE <u>9-20-74</u>	
Orig. Signed by <u>Joe D. Ramey</u> Dist. I, Supv.		DATE <u>9-20-74</u>	
APPROVED BY _____	TITLE _____	DATE _____	
CONDITIONS OF APPROVAL, IF ANY:			