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DISTRIBUTION HOBBS OFFICE O. C. C.	Form C-103 Supersedes Old
	C-102 and C-103
FILE NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	
LAND OFFICE	5a. Indicate Type of Lease
	State Fee.
OPERATOR	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.)	
	7 Unit Amon and New York
OIL GAS WELL OTHER-	7. Unit Agreement Name
2. Name of Operator	0.5
Com 041 Communication	8. F'arm or Lease Name
Sun Oil Company 3. Address of Operator	James McFarland
TO COMPANY TO STATE OF THE STAT	9. Well No.
P. G. Box 2792, Odessa, Texas	1
UNIT LETTER N 660° FEET FROM THE SOUTH LINE AND 1980° FEET FR	10. Field and Pool, or Wildcat
FEET FROM THE SOUTH LINE AND 1700 FEET FR	MINITED TO THE WAY
THE West LINE, SECTION 20 TOWNSHIP 7 S RANGE 33 E NMF	
IOWNSHIP TO RANGE 33 D NMF	~ <i>((())</i>
15. Elevation (Show whether DF, RT, GR, etc.)	12, County
4427' Gr.	
	Roosevelt
Check Appropriate Box To Indicate Nature of Notice, Report or C	Other Data
NOTICE OF INTENTION TO: SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CHANGE PLANS CASING TEST, AND CEMENT JOB	No. No. No. No. No.
OTHER Completion	
OTHER	
17 Describe Describe Described on Complete Compl	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SEE RULE 1103.	ng estimated date of starting any proposed
2-24-66 Western Company circulated hole. Fraced perfs. at intervals	from 4174' to 4293 down
$4\frac{1}{2}$ casing w/40,000 gal. gelled formation water, 40,000# 20-40 sand	s/other oddition
Flushed w/100 bbls. formation water - swabbed. Pulled and reran tubin	ng, ran pump and rods.
24 hour potential ending 3-6-66, 125.00 barrels oil, 55.00 barrels wa	
	ter. GOR 336/1,
gravity 24.3 API Corrected.	
8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
1 .	
1. 1d Walnund	
IGNEDAmag Companyandandand	
IGNED TITLE Area Superintendent	DATE <u>3-7-66</u>

TITLE TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: