NO. OF COPIES RECEIVED			Form C-103	
DISTRIBUTION			Supersedes Old C-102 and C-103	
SANTA FE	NEW MEXICO OIL CONS	ERMATION COMMISSION. C.	Effective 1-1-65	
FILE		11 th on the co		
U.S.G.S.	7	MAY 11 11 23 AM '66	5a. Indicate Type of Lease	
LAND OFFICE	7	MAY 11 11 23 MIL OU	State Fee 🗶	
OPERATOR	-		5. State Oil & Gas Lease No.	
	_			
SUND	PRY NOTICES AND REPORTS ON ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BATION FOR PERMIT -" (FORM C-101) FOR SUC	WELLS ACK TO A DIFFERENT RESERVOIR.		
USE "APPLICA	ATION FOR PERMIT -** (FORM C-101) FOR SUC	H PROPOSALS.)	7. Unit Agreement Name	
OIL GAS			, sand rigorous reason	
WELL WELL OTHER-  2. Name of Operator			8. Farm or Lease Name	
2. Walle of Operator			o. 1 am of Eddso Manie	
3. Address of Operator			Jimes clariand	
3. Address of Operator			9. Well No.	
			10. Field and Pool, or Wildcat	
4. Location of Well			10. Field and Pool, or Wildcat	
UNIT LETTER	FEET FROM THE SEST	LINE AND 1979 F FEET FRO	M Hawaroo S.A.	
THELINE, SECTION ZO TOWNSHIP 7 S RANGE 33 NMPM.				
100				
15. Elevation (Show whether DF, RT, GR, etc.)			12. County	
			Conservalt MMMMM	
16. Ch1	•			
	Appropriate Box To Indicate N			
NOTICE OF	INTENTION TO:	SUBSEQUER	IT REPORT OF:	
_ <del></del>		<u> </u>	<u></u> 1	
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	,	
		OTHER		
OTHER		1		
17. Describe Proposed or Completed work) SEE RULE 1603.	Operations (Clearly state all pertinent det	ails, and give pertinent dates, includi	ig estimuted date of starting any proposed	
A Commence of the Commence of	. to 10:30 a on 5-5-66	run 10 /w. 1 //19 /		
277F	1 exe in the house is	eor 12, sel ma 10, ma	s kecor w/Z saul.	
	collarg solved to 375. The land will sks Theor T2 gel and 100 and he cor wide ball. The last deposit alizers at 37% and 331. Directled appx. AC sks co. at. 10 M hours. Mested			
and centralizers at	, je, taka ji. Olikuwaced	aprilate see sixth co. Gove		
The can st, 30 in asset, 300%, o.k.				
			•	
18. I hereby certify that the informati	on above is true and complete to the best	of my knowledge and belief.		
T/2 W	1.1.00			
SIGNED	Spuell TITLE_	Area superintendent		
	7			
	<b>^</b>			
APPROVED BY	TITLE	-	DATE	

CONDITIONS OF APPROVAL, IF ANY: