

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
OG-1395

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Todd Lower San Andres U
2. Name of Operator MURPHY OPERATING CORPORATION	8. Farm or Lease Name Todd Lower San Andres U Sec. 35
3. Address of Operator P. O. Drawer 2648, Roswell, New Mexico 88201	9. Well No. 6
4. Location of Well UNIT LETTER <u>F</u> , <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>35</u> TOWNSHIP <u>7 South</u> RANGE <u>35 East</u> NMPM.	10. Field and Pool, or Wildcat Todd Lower San Andres As
15. Elevation (Show whether DF, RT, GR, etc.) 4180' D.F.	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 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 JOBS <input type="checkbox"/>	
		OTHER <u>well returned to pump</u> <input checked="" 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.

The subject well has been returned to pump. The status of this well has changed from shut-in to producing.

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

SIGNED Lois N. Brown TITLE Production Clerk DATE September 9, 1980
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
APPROVED BY _____ TITLE _____ DATE SEP 11 1980

RECEIVED
SEP 10 1986
O-2-9
HOMES OFFICE