NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NOT OF COLLEGE MEDITION	· ·		Form C-103
DISTRIBUTION	$H_{05B\otimes r}$	Supersedes Old	
SANTA FE	H95 $_{ m dS, 7}$	C-102 and C-103 Effective 1-1-65	
FILE	Jiji 31 - i	11	
U.S.G.S.	1	1 47 AM 168	5a. Indicate Type of Lease
LAND OFFICE		711 00	State 💥 Fee.
OPERATOR	1		5, State Oil & Gas Lease No.
	•	· ·	Gallina #2
SUNDR	RY NOTICES AND REPORTS ON PROSALS TO BRILL OR TO DEEPEN OR PLUG BA	WELLS ACK TO A DIFFERENT RESERVOIR. H PROPOSALS.	
OIL XX GAS WELL	OTHER-	**	7, Unit Agreement Name
2. Name of Operator		·	8. Farm or Lease Name
Western States Produc	ing Company		State 30
3. Address of Operator			9. Well No.
900 Bank of the South	west Midland, Te	exas	2
4. Location of Well	,		10. Field and Pool, or Wildcat
UNIT LETTER M 6	60 FEET FROM THE South	LINE AND 660 PERT PROM	Chaveroo
THE West LINE SECTION	on 30 township 7-5	S BANGE 33-E	
	15. Elevation (Show whether I	DF, RT, GR, etc.)	12. County
	4449 Gr		Roosevelt
16. Check	Appropriate Box To Indicate Na	ature of Notice Report of Ot	her Data
	NTENTION TO:		T REPORT OF:
		30B3E48EN	REFORT 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	PEDE AND ABANDONMENT
		OTHER Perforate and	treat
OTHER			·
		n	

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 1703.

Perforated 1 shot per foot as follows: 4188, 4192, 4205, 19, 75, 86, 92, 4300, 11, 35, 45, 50, 82, 87, 96, 4400. Job complete 10:00 a.m., 7-19-68. 7-19-68:

Fraced perfs w/40,000 gals ref oil plus 2# sand/gal. 7-20-68:

7-21-68: Ran rods and tubing

7-22-68: Putting on pump to pump back load.

	1	•		
	•			
2	· ·		•	
	r	•		
18. I hereby certify that the information about	e is true and complete to the b	est of my knowledge and belief.		
( Am Ine (V)	4 marti	Office Manager	•	
SIGNED // CL	MMOU THE	Office Manager	DATE	7-29-68
and the state of t		of the same		
APPROVED BY	laved TITLE	· · · · · · · · · · · · · · · · · · ·	DATE	
CONDITIONS OF APPROVAL, IF ANY:	11111		DATE	<del></del>
. 0		- N		