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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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator Roden Oil Company		8. Farm or Lease Name Sams "17"
3. Address of Operator P. O. Box 767, Midland, Texas 79701		9. Well No. 1
4. Location of Well UNIT LETTER F 2086 FEET FROM THE North LINE AND 2086 FEET FROM THE west LINE, SECTION 17 TOWNSHIP 8-S RANGE 38-E N.M.P.		10. Field and Pool, or Wildcat Bluitt San Andres Assoc.
11. Elevation (Show whether OF, RT, GR, etc.) 3986.6' GL		12. County Roosevelt

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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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 JOB <input checked="" type="checkbox"/>	OTHER <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.

Spudded well 1:30 p.m. 10-30-70. Drilled to 342' and set 8-5/8" 20# H-40 casing on bottom with 200 sacks Class "C" Cement with 2% CaCl₂. Cement circulated to surface. WOC 12 hours. Tested casing to 700 psi, held 30 minutes, okay.

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

SIGNED <u><i>J. D. Highsmith</i></u>	TITLE Chief Clerk	DATE 11-4-70
APPROVED BY <u><i>J. D. Highsmith</i></u>	TITLE Supervisor	DATE 11-4-70
CONDITIONS OF APPROVAL, IF ANY:		