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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 checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
K-4348	

## 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
2. Name of Operator Roger C. Hanks		8. Farm or Lease Name Blonde State
3. Address of Operator 2100 Wilco Bldg. Midland, Texas 79701		9. Well No. 2
4. Location of Well UNIT LETTER P 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 32 TOWNSHIP 8-S RANGE 35-E NMPM.		10. Field and Pool, or Wildcat Vada Penn
15. Elevation (Show whether DF, RT, GR, etc.)		12. County Roosevelt

## 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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input 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.

1. Run cast iron bridge plug at 9500 ft.
2. Spot 30 sx cement on top of plug
3. " 50 " " at 4125 ft.
4. " 70 " " " 1322 ft.
5. " 70 " " " 400 ft.
6. " 10 " " " surface
7. Install dry hole marker & clean up location 3-26-74

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

SIGNED <u>Sam R. Thomas</u>	TITLE <u>Office Manager</u>	DATE <u>1-13-75</u>
APPROVED BY <u>John W. Runyan</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		