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LAND OFFICE	
OPERATOR	

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 - 1" (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 D. M. Norman	8. Farm or Lease Name Weathersby
3. Address of Operator P. O. Box 1535, Midland, Texas 79702	9. Well No. 7
4. Location of Well UNIT LETTER <u>N</u> <u>290</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>24</u> TOWNSHIP <u>8 South</u> RANGE <u>34 East</u> NMPM.	10. Field and Pool, or Wildcat Milnesand San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4232 G. R.	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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

Set 4739' of 4½" 10.5# casing @ 4739' with 250 sx. cement

Waited on cement for 12 hours - pressured to 1000# - waited 30 minutes - no pressure drop

Waited on cement for 12 hours

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

SIGNED <u>D. M. Norman</u>	TITLE <u>Operator</u>	DATE <u>12-20-79</u>
Orig. Signed By <u>Jerry Sexton</u>		
APPROVED BY <u>D. L. Sexton</u>	TITLE <u></u>	DATE <u>1-1-1980</u>

CONDITIONS OF APPROVAL, IF ANY: