

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

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

5a. Indicate Type of Lease  
State ☐ Fee ☒

5. State Oil & Gas Lease No.  
N/A

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Re-entry	7. Unit Agreement Name N/A
2. Name of Operator Edwin S. Nichols Explorations, Inc.	8. Farm or Lease Name Elkans 24
3. Address of Operator P.O. Box 326, Meridian, Texas 76665	9. Well No. 1
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 24 TOWNSHIP 7S RANGE 34E N.M.P.M.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 4256 GR	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 checked="" 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"/>	

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.

As per instructions from Jerry Sexton, Supervisor, District I, Hobbs, New Mexico.

100' plug on bottom, 35 sacks cement.  
100' plug at 1000', 10 sacks cement.  
Install marker at surface.

THE COMMISSION MUST BE NOTIFIED 24  
HOURS PRIOR TO THE BEGINNING OF  
PLUGGING OPERATIONS FOR THE C-103  
TO BE APPROVED.

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

SIGNED Susan Godwin TITLE Secretary DATE 06-25-90

ORIGINAL SIGNED BY JERRY SEXTON  
APPROVED BY DISTRICT I SUPERVISOR TITLE \_\_\_\_\_ DATE JUN 29 1990  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 28 1990

OCD  
H. J. BBS OFFICE