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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SEP 11 11 42 AM '68

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. R-10416
7. Unit Agreement Name Pebble Queen sec. 1
8. Farm or Lease Name
9. Well No. 5
10. Field and Pool, or Wildcat
12. County Chaves

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"/>
2. Name of Operator GREAT WESTERN DRILLING COMPANY
3. Address of Operator P. O. Box 1659, Midland, Texas 79701
4. Location of Well UNIT LETTER E .1980 FEET FROM THE N LINE AND 660 FEET FROM THE N LINE, SECTION 1 TOWNSHIP 13-S RANGE 31-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4393 GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
CASING TEST AND CEMENT JOB <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.

This hole was loaded with mud. A 35 sack cement plug was spotted at 3020'. (7-14-68)
1600' of 5½" casing was pulled and 25 sack plugs were spotted at 1600' and 384', with 10
sacks at the surface. A marker was placed. (7-16-68)

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

SIGNED O. H. Crews TITLE Administrative Coordinator DATE August 29, 1968

APPROVED BY John W. Ramsey TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: