. U. UPIES RECEIVED	1		Form C-103
DISTRIBUTION	 	-	Supersedes Old C-102 and C-103
	NEW MEXICO OIL	CONSERVATION COMMISSION	Effective 1-1-65
SANTA FE	HEW MEXICO OIL		
FILE	+-+		5a. Indicate Type of Lease
U.S.G.S.	+		State Fee X
LAND OFFICE	-}		5. State Oil & Gas Lease No.
OPERATOR			
(CO NOT USE THIS	SUNDRY NOTICES AND REPORT ORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR E "APPLICATION FOR PERMIT -" (FORM C-101)	SON WELLS PLUG BACK TO A DIFFERENT RESERVOIR.	
	E "APPLICATION FOR PERMIT -" (FORM C-101)	FOR SUCH PROPOSALS.)	7. Unit Agreement Name
1. OIL GA	5 .		
	OTHER-		8. Farm or Lease Name
2. Name of Operator			Phylis Williams
George H.	Williams		9. Well No.
3. Address of Operator			1
c/o Oil Reports	& Gas Services, Inc., Box 7	63, Robbs, New Mexico 88240	10. Field and Pool, or Wildcat
4. Location of Well			1
UNIT LETTER		South LINE AND 1650 FEET FROM	Caprock Queen
Ti a a d	TOWNSHIP	13 S RANGE 31 E NMPM	
THEEst			VIIIIIIIIIIIIIIIIIIIIIIIIIIIII
mmmm	15. Elevation (Show to	whether DF, RT, GR, etc.)	12. County
			Chaves
16.	Cl. 1 Assessing Pay To India	cate Nature of Notice, Report or Ot	her Data
		substitute of Notice, Report of Or	T REPORT OF:
NO.	ICE OF INTENTION TO:	3083240211	T NET ON TOTAL
			ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND ABAND		PLUG AND ABANDONMENT
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PEOG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JQB	
		OTHER	
OTHER			
	(0) 1 11 noni	nent details, and give pertinent dates, includin	g estimated date of starting any proposed
17. Describe Proposed or work) SEE RULE 110	Completed Operations (Clearly state all perts. 3.	ment details, and gets persons	
,			
T+	is proposed to plug as fol	lows:	
**	25 proposed to 1		
g.	ot 100' plug 1300 to 1400		
	ot 100' plug across 5 1/2"	casing stub @ 1000'	
ត្រូវ C	ot 100' plug 200 to 300		
Sj	of 100. Ping 200 to 300	lace marker	
10 Sack plug at surface & replace marker			
Mi	d between all plugs.		
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		C OF	
	THE THE THE	C103.	
	THE STATE OF THE SAME FOR THE		
	11 14 15 Garage 在整路外的		
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18. I hereby certify that	he information above is true and complete to	the best of my knowledge and better.	
1.	$1/1_0$	A	4/19/76
1100100	4 1/4/6/1 TI	Agent	DATE 47.3/10
SIGNED LA TILLE	20X F		
	(
	▼1	TLE	DATE
A D D D OVED BY		·	

APPROVED BY ____

CONTRACTOR OUT