2. Name of Operator Weldon S. Guest & 3. Address of Operator	DRY NOTICES AND REPORTATION FOR PERMIT -" (FORM C-101) OTHER- I. J. Wolfson	Injection Well	5. 5. 5. 7. 8. Q 9.	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65 I. Indicate Type of Lease State Fee State Gas Lease No. B-8822 I. Unit Agreement Name Farm or Lease Name Drickey Nucen Sand Unit Tr 15 Well No.
4. Location of Well	Gas Services, Inc., 1		10	2 C. Field and Pool, or Wildcat
UNIT LETTER	660 FEET FROM THE SC	outh LINE AND 660	FEET FROM	Caprock Queen
THE East LINE, SEC	TION 35 TOWNSHIP	13 S RANGE 31	E NMFM.	
		whether DF, RT, GR, etc.)	İ	Chaves
PERFORM SEMEDIAL WORK TEMPORARILY ABANDON DULL OR ALTER CASING	INTENTION TO: PLUG AND ABAND CHANGE PLANS	ON EMEDIAL WORK COMMENCE DRILLING O	BOL THE	EPORT OF: ALTERING CASING PLUG AND ABANCONMENT
OTHER		_		
Set cast iron brid Cut & pull 5 1/2" Spot 100' plug acr Spot 100' plug acr Spot 100' plug acr	oss 5 1/2" casing stuces top of salt 0 150 css 8 5/8" casing sho surface with regulatings	with 3 sacks cementals o with 3 sacks cementals o with 3 sacks cementals	SSION MUST CE IR TO THE EX OPERATIONS FO	GINNING OF
18. I hereby certify that the information of the standard of t	Original by		lief.	DATE 10/16/73
	Joe D. Ramey	-		DATE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
APPROVED BY	Dist. I, Supv.	E		DATE
CONDITIONS OF APPROVAL, IF AN	v .			