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NEW MEXICO OIL CONSERVATION COMMISSION

JUL 20 7 45 AM '66

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-8234
7. Unit Agreement Name
8. Farm or Lease Name McAlester State "A"
9. Well No. 2
10. Field and Pool, or Wildcat Tobas
12. County Chaves

SUNDY 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- Dry Hole
2. Name of Operator Cabot Corporation
3. Address of Operator P. O. Box 4395, Midland, Texas
4. Location of Well UNIT LETTER E , 1830 FEET FROM THE N LINE AND 660 FEET FROM THE W LINE, SECTION 32 TOWNSHIP 8-S RANGE 33-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4383.3 GR.

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 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 JOB <input type="checkbox"/>	OTHER Completion As Fresh Water Well <input checked="" 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.

Well was drilled to a total depth of 291' with cable tools, with no casing run. An agreement has been reached with the surface lessee whereby ownership of the well is transferred to the surface lessee for use as a fresh water supply well. The letter agreement setting forth the conditions of transfer is included with this form.

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

SIGNED Percy C. Quinn TITLE Dist. Prod. sup't. DATE 7-15-66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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