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# NEW MEXICO OIL CONSERVATION COMMISSION

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.	
<b>E-8253</b>	

## 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"/>		7. Unit Agreement Name
2. Name of Operator <b>Signal Oil and Gas Company</b>		8. Farm or Lease Name <b>State 30</b>
3. Address of Operator <b>509 West Texas Avenue, Midland, Texas</b>		9. Well No. <b>4</b>
4. Location of Well UNIT LETTER <b>E</b> , <b>1880</b> FEET FROM THE <b>North</b> LINE AND <b>560</b> FEET FROM THE <b>West</b> LINE, SECTION <b>30</b> TOWNSHIP <b>8-S</b> RANGE <b>33-E</b> NMPM.		10. Field and Pool, or Wildcat <b>Tobas (Penn.)</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4399' K. B.</b>		12. County <b>Chaves</b>

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 checked="" 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 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.

Spudded at 7:30 P.M., 3-22-65.  
Drilled 15" hole to 385'.  
Cemented 10-3/4", 32.75#, H-40, ST&C, 8Rd, Limited Service Casing at 376'  
with 160 sax Inccr plus 8% gel and 2% CaCl<sub>2</sub>, followed with 100 sax Inccr  
plus 2% gel and 2% CaCl<sub>2</sub>.  
Installed BOP.  
Tested casing and BOP to 1000 psi after 18 hours. Held okay.

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

SIGNED A. C. Ambler A. C. AMBLER TITLE DIVISION PRODUCTION MANAGER DATE March 24, 1965

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: