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 [X]   Fee [ ]

5. State Oil & Gas Lease No.
K-4495

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 [ ]   GAS WELL [ ]   OTHER- Drilling Well

7. Unit Agreement Name
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2. Name of Operator
Humble Oil & Refining Company

8. Farm or Lease Name
New Mexico State BX

3. Address of Operator
P. O. Box 2100, Hobbs, New Mexico 88240

9. Well No.
3

4. Location of Well

UNIT LETTER G , 1989 FEET FROM THE North LINE AND 1997 FEET FROM

THE East LINE, SECTION 16 TOWNSHIP 8-S RANGE 33-E NMPM.

10. Field and Pool, or Wildcat
Tobac Pennsylvanian

15. Elevation (Show whether DF, RT, GR, etc.)
4417 D. F.

12. County
Chaves

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]
TEMPORARILY ABANDON [ ]
PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]
CHANGE PLANS [ ]

OTHER _____ [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]
COMMENCE DRILLING OPNS. [ ]
CASING TEST AND CEMENT JOB [ ]
OTHER _____

ALTERING CASING [ ]
PLUG AND ABANDONMENT [X]

[ ]

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 plugged and abandoned.

Plugs set as follows:

       Plug #1 from 9100 to 8900 with 60 sxs. cement.
       Plug #2 from 7377 to 7320 with 25 sxs. cement.
       Plug #3 from 6487 to 6430 with 25 sxs. cement.
       Plug #4 from 4610 to 4510 with 30 sxs. cement.
       Plug #5 from 3650 to 3550 with 25 sxs. cement.
       Plug #6 from 0 to 30 with 10 sxs. cement.

Dry hole marker installed per NMOCC requirement.

NMOCC will be notified when location clean and level.

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

SIGNED _____ TITLE Dist. Adm. Supvr. DATE 4-28-65

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: