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NEW MEXICO OIL CONSERVATION COMMISSION

SEP 21 11 23 AM '65

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. 2850
7. Unit Agreement Name
8. Farm or Lease Name Davis-State
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat
12. County Chaves

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"/>
2. Name of Operator GREAT WESTERN DRILLING COMPANY
3. Address of Operator Box 1659, Midland, Texas
4. Location of Well UNIT LETTER C , 1980 FEET FROM THE West LINE AND 660 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 8-S RANGE 32-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4414 GR

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 ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

The Davis-State No. 1 was spudded September 9, 1965 @ 11:00 P.M. 251' of 10-3/4" 32.75# H-40 casing was circulated with 250 sacks of cement @ 265'. After 18 hrs. a pressure of 750 psi was applied at the surface. There was no pressure drop. On Sept. 15, 1965, 3587' of 7-5/8" casing was cemented @ 3600' with 600 sacks. After 24hrs. a pressure of 1500 psi was applied at the surface. There was no pressure drop.

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

SIGNED O.H. Crews TITLE Administrative Coordinator DATE September 20, 1965

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