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NEW MEXICO OIL CONSERVATION COMMISSION

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

10/11/67

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	K-3259

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 Sun Oil Company	8. Farm or Lease Name New Mexico "H" State
3. Address of Operator P. O. Box 2792, Odessa, Texas 79760	9. Well No. 13
4. Location of Well UNIT LETTER <u>P</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>8 S</u> RANGE <u>30 E</u> NMPM.	10. Field and Pool, or Wildcat Und. Cato - San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4142' Gr.	12. County Chaves

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>
REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> OTHER <input 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.

5-4-67 Lane Wells ran Gamma Ray 0 - 3597', density log, caliper, and focus 454-3597'. Ran 90 jts. 4 1/2" OD, 9.5# casing seated @ 3598'. Cemented w/300 sks Trinity Lite Wate, 7.5# salt/sk, 1/4# Flocele, .5% CFR-2. WOC 18 hours. Tested casing 2000#, 30 min o.k. Tom Hansen ran temperature survey 0 - 3567'. Top of cement 2517'.

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

SIGNED J. E. Edison TITLE Area Superintendent DATE 5-9-67

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: