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HOBBS OFFICE D. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION

JUL 6 11 36 AM '67

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name CROSBY	
9. Well No. 1	
10. Field and Pool, or Wildcat CATO	
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 LOHMANN OILWELL SERVICE, INC.
3. Address of Operator 202 W. BROADWAY PLACE HOBBS, NEW MEXICO	4. Location of Well UNIT LETTER Q , 1980 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 5 TOWNSHIP 8S RANGE 30 E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) GR 4035	

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

NOTICE OF INTENTION TO:

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"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input checked="" 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.

PERF. 3137-50-53-59-66-72-82 3225- 38- 43-45-49-56-50 W/ 1/2" JETS.
ACIDIZE W/ 4000 GALS. 28 % ACID. RUN 108 JTS. 2 3/8 E U E 8 ROUND THREAD
J-55 TUBING TO 3252'.

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

SIGNED *[Signature]* TITLE PRESIDENT DATE 7/1/67

APPROVED BY *[Signature]* TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: