

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
 Orig & 2cc: OCC, Hobbs, N.M.
 cc: Regional Office
 cc: Partner
 cc: file

HOBB'S OFFICE O. C. C.
 Form C-103
 Supersedes Old
 C-102 and C-103
 Effective 1-1-65
 JUL 11 8 28 AM '67

5a. Indicate Type of Lease
 State ☐ Fee ☒

5. State Oil & Gas Lease No.

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 - I" (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 SINCLAIR OIL & GAS COMPANY	8. Farm or Lease Name L. C. HARRIS
3. Address of Operator P. O. Box 1920, Hobbs, New Mex co 88240	9. Well No. 8
4. Location of Well UNIT LETTER 0, 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 15 TOWNSHIP 8S RANGE 30E NMPM.	10. Field and Pool or Wildcat Undesignated Cato - San Andres Ext.
15. Elevation (Show whether DF, RT, GR, etc.)	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"/>	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 JOBS <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.

7-3-67 Spudded 12 1/2" hole 9:45 AM 7-3-67, drilled surface and red bed to 282'. Ran 8-5/8" OD 20# J-55 casing set @ 282' and cemented w/200 sks. Incor Cement plus 2% Cal. Chl. & 1/4# Flo Seal per. sk. Cement Circulated. WOC 24 hrs.
 7-4-67 Pressure tested casing to 1000# for 30 mins. Tested O.K.

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

SIGNED [Signature] TITLE Superintendent DATE 7-6-67

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: