

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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 -" (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 C. E. LaRue and B. N. Muncy, Jr.	8. Farm or Lease Name Gulf Kimmons
Address of Operator P. Box 470, Artesia, New Mexico 88210	9. Well No. 2
4. Location of Well UNIT LETTER A, 660 FEET FROM THE North LINE AND 660 FEET FROM East THE LINE, SECTION 19 TOWNSHIP 18-S RANGE 31-E NMPM.	10. Field and Pool, or Wildcat Undesignated Tom Tom
15. Elevation (Show whether DF, RT, GR, etc.) 4183' GL	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 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.

Well spudded 4/8/84. Ran 1216' of 24# API 8 5/8" casing. Cemented with 300 sacks Halite w/2% CaCl and 150 sacks Class C w/3% CaCl, Circulated 25 sacks to pit 4/10/84. Pressured surface casing for 30" @ 1000# with no leakage.

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

SIGNED [Signature] TITLE Operator DATE April 13, 1984

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE APR 24 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 23 1984

OCC  
HOBBS