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NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 25 1 50 AM '69

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 8G-2404	

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 Western Oil Producers, Inc.		8. Farm or Lease Name State "A"
3. Address of Operator P. O. Box 2055, Roswell, New Mexico 88201		9. Well No. 1
4. Location of Well UNIT LETTER <u>E</u> , <u>1980</u> FEET FROM THE <u>south</u> LINE AND <u>660</u> FEET FROM THE <u>west</u> LINE, SECTION <u>34</u> TOWNSHIP <u>16-S</u> RANGE <u>33-E</u> NMPM.		10. Field and Pool, or Wildcat Lazy J Penn
15. Elevation (Show whether DF, RT, GR, etc.) GL 4235		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

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

8-15-69

Swabbed 550 bbls fluid in 30 hours.
240 bbls oil, 310 bbls water.

8-18-69

Treated oil with hot oil unit.

8-19-69

Sold 157 bbls to Permian Oil Corporation
Prep. to install pumping unit, rods and pump.

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

SIGNED <u>[Signature]</u>	TITLE <u>Pres</u>	DATE <u>8-20-69</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR DISTRICT</u>	DATE <u>AUG 28 1969</u>
CONDITIONS OF APPROVAL, IF ANY:		