

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

HUMBLE OIL & GAS CO.
NEW MEXICO OIL CONSERVATION COMMISSION
FEB 27 9 31 AM '67

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

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
E 2064

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
Humble Oil & Refining Company
3. Address of Operator
Box 1600, Midland, Texas
4. Location of Well
UNIT LETTER C , 660 FEET FROM THE north LINE AND 1,980 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 12-S RANGE 34-E NMPM.

7. Unit Agreement Name
8. Form of Lease Name
South Four Lakes Unit
9. Well No.
5
10. Field and Pool, or Wildcat
Four Lakes Pennsylvania
12. County
Lea

15. Elevation (Show whether DF, RT, GR, etc.)
4,160' DF

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

Pumping equipment was installed in well on 7-10-66.

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

SIGNED	TITLE	DATE
	Agent	2-23-67
APPROVED BY	TITLE	DATE

CONDITIONS OF APPROVAL, IF ANY: