NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	-	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease State Fee X
AND OFFICE		
OPERATOR		5. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR USE "APPLI	DRY NOTICES AND REPORTS ON WELLS proposals to drill or to deepen or plug back to a different reservoir. cation for permit	7. Unit Agreement Name
OIL CAS WELL CAS WELL CAS WELL CAS	OTHER-	8. Farm or Lease Name
Cities Service 0	Turner D	
Address of Operator		9. Well No.
P 0 Box 69 - H	lobbs, New Mexico 88240	
4. Location of Well		10. Field and Pool, or Wildcat
N	660 FEET FROM THE South LINE AND 1980 FEET F	ROM Gladiola Dev. S.W.
UNIT LETTER		
Vest	ection 27 TOWNSHIP 128 RANGE 37E NM	РМ. (()))))))))))))))))))))))))))))))))))
THE LINE, SE		
mmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3895 GR	
	ck Appropriate Box To Indicate Nature of Notice, Report or	Other Data ENT REPORT OF:
	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PERFORM REMEDIAL WORK		Г

Originally it was planned to re-complete this well in the Wolfcamp-Cisco Formation. The Devonian Formation was squeezed off and well was plugged back to Wolfcamp-Cisco Formation. The Wolfcamp-Cisco was perforated (9595'-9835') and tested for production - Pumped 0 oil, 270 bbls. water, 24 hours. Workover was a failure and it was decided to squeeze off Wolfcamp-Cisco Formation and re-enter the original Devonian Formation. The Wolfcamp-Cisco formation was squeezed off; cement and bridge plug were drilled out and the well was recompleted in the original Devonian open hole 12263'-288'. Former production from Devonian formation was 47 oil, 450 water, 24 hours. Production after workover: 62 bbls. oll, 589 water, 24 hours.

18. I hereby certify that the information above is true and complete	e to the be	est of my knowledge and belief.		
SIGNED	T(TLE	District Clerk	DATE_	September 30, 1968
APPROVED BY ALL ALL	T ITLE		DATE	1(A
CONDITIONS OF APPROVAL, IF ANY:				