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NEW MEXICO OIL CONSERVATION COMMISSION

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

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| SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small> | | 5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> |
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- | | 5. State Oil & Gas Lease No. |
| 2. Name of Operator TOM L. INGRAM | | 7. Unit Agreement Name |
| 3. Address of Operator P. O. Box 1757, Roswell, New Mexico 88201 | | 8. Form or Lease Name Craig |
| 4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 27 TOWNSHIP 12S RANGE 37E NMPM. | | 9. Well No. 1 |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3906 KB | | 10. Field and Pool, or Wildcat SW Gladolia-Penn |
| 12. County Lea | | |

| | | | |
|--|--|---|---|
| 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____ | PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____ | ALTERING CASING <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.

9/28/68 Baker Cast Iron Bridge Plug at 11,996'.
Perforated with 4 shots per foot from 11,123-11,128'.
Acidized with 500 gallons spearhead acid and completed as an oil well.

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

SIGNED Tom L. Ingram TITLE Operator DATE September 30, 1968

APPROVED BY Joe Hames TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY: