NO. OF COPIES RECEIVED				Form C 102	
DISTRIBUTION		Form C-103 Supersedes Old			
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION			C-102 and C-1 Effective 1-1-6	·
FILE	- NEW MEXICO O	TE CONSERVATION C	Omm(133) ON	Effective 1-1-6	19
U.S.G.S.				5a. Indicate Type	of Lease
LAND OFFICE				State	Fee X
OPERATOR				5. State Oil & Gas	s 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.)					
OIL X GAS WELL OTHER-					t Name
2. Name of Operator Elk Oil Company				8. Farm or Lease Name Johnson A	
3. Address of Operator Box 310, Roswell, New Mexico 88201				9. Well No.	
4. Location of Well  UNIT LETTER M 660 FEET FROM THE SOUTH LINE AND 6F0 FEET FROM				10. Field and Pool, or Wildcat Gladiola	
UNIT LETTER	FEET FROM THE	LINE AND	FEET FROM	mmm,	THINITH IN
West Line, s	ECTION TOWNSHIP	12S RANGE	38 <u>F</u> NMPM		
15. Elevation (Show whether DF, RT, GR, etc.) 3865 Grd				12. County Lea	
		l' N	n o.		
	ck Appropriate Box To Inc	iicate Nature of No	<del>=</del>	ner Data T REPORT OF:	
NOTICE O	F INTENTION TO:		SUBSEQUEN	REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABA	NDON REMEDIAL WOR	.,	ALTER	ING CASING
TEMPORARILY ABANDON	FEOG AND ADA	<del></del>	ILLING OPNS.		IND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS		AND CEMENT JOB		
, , , , , , , , , , , , , , , , , , , ,		OTHER			
OTHER					
17. Describe Proposed or Complete	ad Operations (Clearly state all ne	rtinent details and give n	pertinent dates, including	estimated date of	starting any proposed
work) SEE RULE 1103.	a Sperations (Steart) state art po-	, tottom detaile, and give p		, ,	
Propose to plug and abandon as follows:					
Tropond to pray and assumed as a series of					
Place 200' plug across perfs from 9400'-9500' (Perfs from 9501'-9552')					
Pull 4600' of 5½ casing					
Place 200' plug from 4500'-4700' (across casing stub)					
Place 10 sx at surface, replace dry hole marker					
	Mud				
	/ (и 0				
24 hr. notice					
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNED	Tella.	President	t	DATE4/	30/73
	7	T!T! F		DATE	
APPROVED BY	District by Ora	TITLE			

CONDITIONS OF APPROVAL, IF ANY: