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

# NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease
State [ ]  Fee [X]

5. State Oil & Gas 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.)

1. OIL WELL [ ]  GAS WELL [ ]  OTHER- **Dry**

2. Name of Operator
**Tenneco Oil Company**

3. Address of Operator
**P. O. Box 1031, Midland, Texas**

4. Location of Well

UNIT LETTER **O**, **660** FEET FROM THE **south** LINE AND **1980'** FEET FROM

THE **east** LINE, SECTION **7** TOWNSHIP **14-S** RANGE **36-E** NMPM.

7. Unit Agreement Name

8. Farm or Lease Name
**Montieth-Hannah**

9. Well No.
**1**

10. Field and Pool, or Wildcat
**Undesignated**

15. Elevation (Show whether DF, RT, GR, etc.)
**3977 GL**

12. County
**Lea**

## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]

TEMPORARILY ABANDON [ ]

PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]

CHANGE PLANS [ ]

OTHER _____ [ ]

### SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]

COMMENCE DRILLING OPNS. [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER _____

ALTERING CASING [ ]

PLUG AND ABANDONMENT [X]

[ ]

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.

**Well has been plugged as follows:**

**25 sx plug @ 960' and 25 sx plug @ 395'**
**10 sx plug @ surface and installed dry hole marker.**
**3690' of 8-5/8" csg and 415' of 11-3/4" csg left in hole.**
**Well plugged and abandoned 12-21-65.**

**This is final report & supplements the plugging report submitted November 17, 1965.**

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

SIGNED _____ **A.R.Gibson**  TITLE **Dist. Drlg. Foreman**  DATE **1-7-66**

APPROVED BY _____  TITLE _____  DATE _____

CONDITIONS OF APPROVAL, IF ANY: