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NEW MEXICO OIL CONSERVATION COMMISSION

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.
NM 435

SUNDY 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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection	7. Unit Agreement Name
2. Name of Operator Texas Pacific Oil Company	8. Farm or Lease Name State "AH"
3. Address of Operator Box 1069 - Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER N , 660 FEET FROM THE South LINE AND 1900 FEET FROM THE West LINE, SECTION 14 TOWNSHIP 12-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Ranger Lake Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4151 GR	12. County Lea

16.

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

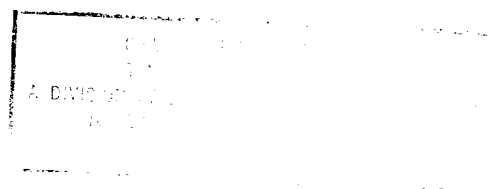
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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

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.

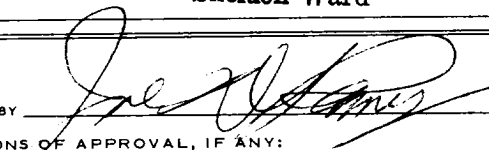
Above well was converted to salt-water disposal injection well 11-30-68.

- 1. Rigged up. Drilled out CIBP at 9650'.**
- 2. Ran injectivity test. 9835-9933'.**
- 3. Rigged down.**
- 4. Began salt water injection January 1969 - 10,150 bbls. for month.**



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

Original Signed by

SIGNED Sheldon Ward	TITLE Area Superintendent	DATE 2-17-69
APPROVED BY 	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		