NO. OF COPIES RECEIV	ED	HOBBS OFF	'CE 0. 0. 0.	Form C-103
DISTRIBUTION				Supersedes Old C-102 and C-103
SANTA FE		NEW MEXICO OF CON	SERVATION COMMISSION	Effective 1-1-65
FILE		604 2 0	K7 AM 198	
u.s.g.s.				5a. Indicate Type of Lease
LAND OFFICE				State XX Fee.
OPERATOR				5. State Oil & Gas Lease No.
L				OG - 5092
· · · · · · · · · · · · · · · · · · ·	SUMPRY NOT	ICES AND DEPORTS ON	IWELLS	
(DO NOT USE TH	IS FORM FOR PROPOSALS 1	ICES AND REPORTS ON TO DRILL OR TO DEEPEN OR PLUG PERMIT —" (FORM C-101) FOR SU	MELLO BACK TO A DIFFERENT RESERVOIR.	
1.	USE AFFEIGATION FOR	PERMIT - (FORM C-101) FOR 30	CH PHOPOSALS.)	7. Unit Agreement Name
OIL KX	WELL OTHE			
2. Name of Operator	8. Farm or Lease Name			
WESTERN ST	Cabot State			
3. Address of Operator	9. Well No.			
900 Bank o	3			
4. Location of Well				
	10. Field and Pool, or Wildcat			
UNIT LETTER J.	FROM Wildcat			
THEEast	LINE, SECTION4	TOWNSHIP 12-S	RANGE34-E	NMPM. (1)
		15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
		4175 GR		Lea
16.	Check Approp	riate Boy To Indicate	Nature of Notice Report of	er Other Data
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:				
147	STICE OF INTENT	ION TO:	SUBSEQ	UENT REPORT OF:
			_	
PERFORM REMEDIAL WOR	к	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING		CHANGE PLANS	CASING TEST AND CEMENT JOB	<u> </u>
			OTHER	
OTHER				
	G: 1: 16 : 11	(Classical and a state of the s		
work) SEE RULE 1	or Completed Operations 193.	(Clearly state all pertinent de	taits, and give pertinent dates, inc	luding estimated date of starting any proposed
į.				•
				•
Oil String	1			
5-28-68				
TD	10,375'. Ran	319 jts (161 jts o	f N-80 and 158 jts of	J-55) 11,6#, 4-1/2"
				gel cement. Tested casing
		minutes held o.k.		•
			•	
				•
				•
18. I hereby certify that	the information above is	s true and complete to the best	of my knowledge and belief.	
/   -	Mac/1	4		
	/) \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	mon	Office Manager	DATE May30, 1968
SIGNED	UI COUNT	TITLE	OTTICE Manager	DATE MAYSU, 1900
	- B) 1	<del>/                                    </del>		
\ /.	ax I do	To a second		
APPROVED BY		TITLE		DATE
//	<i>//</i> =			

CONDITIONS OF APPROVAL, IF ANY: