NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	ERVATION COMMISSION	Effective 1-1-65
FILE			5a. Indicate Type of Lease
U.S.G.S.		· ·	State Fee Y
OPERATOR		`	5. State Oil & Gas Lease No.
SUNI (DO NOT USE THIS FORM FOR USE "APPLIC			
OIL GAS WELL WELL	OTHER-		7. Unit Agreement Name
2. Name of Operator  TOM L. INGRAM	8. Farm or Lease Name  Craia 'A'		
3. Address of Operator	9. Well No.		
P. 0. Box 1757, Ros	1		
4. Location of Well	10. Field and Pool, or Wildcat		
UNIT LETTER H ,,_	Gladiola Wolfcamp		
THE East LINE, SEC	TION TOWNSHIP	RANGENM	PM.
mmmmmm	12. County		
3890.7			Lea
16. Chec	k Appropriate Box To Indicate N	lature of Notice Report or 6	
	INTENTION TO:	4	ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCI: DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	
OTHER			
17. Describe Proposed or Completed work) SEE RULE 1603.	Operations (Clearly state all pertinent det	lails, and give pertinent dates, includ	ing estimated date of starting any propose
40 joints (1249,90°	5.82° T0) of 5½° 17# N-80 ° T0) 5½° 17# K-55 LT&C 6	2 joints (1949.98 TO)	$5\frac{1}{2}$ '' 17# K-55 buttress.
with Halliburton gu	uide shoe at 10,0531, Hall tralizers, cemented w/300	iburton insert float a	it 9988 and using 12
of salt per sack.	Plugged down at 1:30 P.M.	MST 11/8-68. Wor 24	hrs tested casing
1500 psi for 30 mir	nutes. Held Okav.	1131 1173-80. WOL 24	mrs, tested casing
, , , , , , , , , , , , , , , , , , , ,	mere one,.		
18. I hereby certify that the informati	ion above is true and complete to the best	of my knowledge and belief.	
1 =	- 2		
SIGNED	TITLE	Operator	DATE November 11, 1968
~ /		vpor a cor	HOVEHUET II, 1950
(1 ]/ .	P		
APPROVED BY	TITLE		DATE
CONDITION OF APPROVAL, IF A	NY:		