| NO. OF COPIES RECEIVED | | | | Supersedes O |)ld | |
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| DISTRIBUTION | | TICLE TO THE TOTAL TO THE TOTAL TOTA | . čohujenov | C-102 and C- | 103 | |
| SANTA FE | NE NE | W MEXICO OIL CONSERVATION | | Effective 1-1- | ·05 | |
| FILE | | | | 5a. Indicate Type | | |
| U.S.G.S. | + | | | State | Fee 🛣 | |
| LAND OFFICE OPERATOR | | | | 5. State Oil & Go | us Lease No. | |
| | | | | ······································ | mmmm | |
| | SUNDRY NOTICES | AND REPORTS ON WELLS L OR TO DEEPEN OR PLUG BACK TO A DII -" (FORM C-101) FOR SUCH PROPOSALS | FFERENT RESERVOIR. | | XIIIIIIII | |
| | FORM FOR PROPUSALS TO DRILL | -** (FORM C-101) FOR SUCH PROPOSALS | 5.) | 7. Unit Agreemen | nt Name | |
| 1. OIL GA | | | | | | |
| 2. Name of Operator | | | | 1 . | 8. Farm or Lease Name | |
| Coastal States Gas Producing Company | | | | Chambers 9. Well No. | | |
| 3. Address of Operator | | dann Dan 762 Habba | New Merries | g. Well No. | | |
| | eports & Gas Serv | ices, Box 763, Hobbs, | New Marteo | 10. Field and Pa | ool, or Wildcat | |
| 4. Location of Well | 1980 | T FROM THENorthLINE AN | 1980 | Undes. No | rth Baum Penn | |
| UNIT LETTER | FEE | FROM THELINE AN | PEET FRO | | THIIIIII | |
| West | 29 | TOWNSHIP 13 S RANG | 33 E NMPI | | | |
| THE | | | | | <i>7]]]]]]</i> | |
| | 15. | Elevation (Show whether DF, RT, G | R, etc.) | 12. County | | |
| | | 4259.7 GR | D C | | | |
| 16. | | Box To Indicate Nature of | Notice, Report of U | ither Data NT REPORT OF | ·• | |
| NOT | TICE OF INTENTION | 70: | 308354051 | VI KEI OKT OT | • | |
| PERFORM REMEDIAL WORK | | PLUG AND ABANDON REMEDIAL | WORK | ALTE | RING CASING | |
| TEMPORARILY ABANDON | | COMMENC | E DRILLING OPNS. | PLUG | AND ABANDONMENT | |
| PULL OR ALTER CASING | | CHANGE PLANS CASING T | EST AND CEMENT JOB | | | |
| | | OTHER | | | | |
| | ut in | X | | | | |
| 17. Describe Proposed or | Completed Operations (Clea | rly state all pertinent details, and gr | ive pertinent dates, includi | ng estimated date o | f starting any proposed | |
| work) SEE RULE 110 | 3. | | | | | |
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| | Shut i | in pending further stu | ay. | | | |
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| | the information shows is true | and complete to the best of my know | vledge and belief. | | | |
| 18. I hereby certify that | ine information above is title | | • | | | |
| 9. L | Amut | TITLE Agent | | DATE 2/2 | 28/69 | |
| SIGNED | | 7 | | | | |
| | MI | / | | | | |
| APPROVED BY | e Jathane | 1 TITLE | | DATE | | |
| CONDITIONS OF APPR | OVAL, IF ANY: | • | | | | |
| | , | | | | | |