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NEW MEXICO OIL CONSERVATION COMMISSION

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

<p>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.)</p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -</p>		<p>5. State Oil & Gas Lease No. L-44 & L-521</p>
<p>2. Name of Operator Coastal States Gas Producing Company</p>		<p>7. Unit Agreement Name</p>
<p>3. Address of Operator P. O. Box 235 Midland, Texas 79701</p>		<p>8. Farm or Lease Name State "26" Com</p>
<p>4. Location of Well UNIT LETTER L 1980 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 26 TOWNSHIP 14S RANGE 32E NMPM.</p>		<p>9. Well No. 3</p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) 4290.5' GL</p>		<p>10. Field and Pool, or Wildcat Undesignated</p>
		<p>12. County Lea</p>

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 ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spud Date: 11/18/68

12/21/68: Ran 309 joints of 5-1/2" casing (as below) casing set @ 9956'. Cemented with 200 sacks Class "C" 1:1 Posmix, 4% gel, .5 of 1% CFR-2, 9# salt per sack. Plug down @ 11:45 p.m. Tested casing with 1250#, held okay. WOC 100 hrs.

No. Joints	Description
118	5-1/2" 15.5# 8R J-55 ST & C
40	5-1/2" 15.5# 8R J-55 LT & C
66	5-1/2" 17 # 8R J-55 ST & C
31	5-1/2" 17 # 8R J-55 LT & C
54	5-1/2" 17 # 8R N-80 LT & C

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

SIGNED Jack R. Howard

TITLE Division Production Supt.

DATE 1/6/69

APPROVED BY [Signature]

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: