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AMENDED

HOBBS OFFICE D.G.G.
NEW MEXICO OIL CONSERVATION COMMISSION

APR 16 2 16 PM '69

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.	
K 5920	
7. Unit Agreement Name	
NA	
8. Farm or Lease Name	
STATE	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
Lea	

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.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
Freeport Oil Company

3. Address of Operator
301 First Savings Bldg.

4. Location of Well
UNIT LETTER J 2310 FEET FROM THE East LINE AND 1650 FEET FROM THE South LINE, SECTION 11 TOWNSHIP 13 S RANGE 36 E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3947.0 GL

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>Ran intermediate 8 5/8" csg.</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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 1703.

April 5, 1969 - Ran 110 jts. (4504') 8 5/8" 32# & 24# csg. Set @ 4525'. Cemented with 125 sacks Incor + 8% gel and 200 sacks Incor + 2% CaCl₂. Plug down @ 8:30 p.m. 4/5/69. Estimate top of cement @ 3500'. Waited on cement 16 1/2 hrs then tested casing and BOP to 1000 psi for 30 minutes.

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

SIGNED Don L Sparks TITLE Division Engineer DATE 4-9-69

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT # DATE APR 17 1969

CONDITIONS OF APPROVAL, IF ANY: