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NEW MEXICO OIL CONSERVATION COMMISSION

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

APR 17 12 51 PM '69

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
17 2238	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
3. Address of Operator	9. Well No.
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER <u>C</u> , <u>884</u> FEET FROM THE <u>100th</u> LINE AND <u>1800</u> FEET FROM THE <u>Range</u> LINE, SECTION <u>36</u> TOWNSHIP <u>10S</u> RANGE <u>32E</u> NMPM.	Undesignated
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4200.0 ft	San Juan

16.

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.

1. The well is located in the San Juan County, New Mexico, and is situated on the 100th line and 1800 feet from the Range line, Section 36, Township 10S, Range 32E, NMPM. The well is situated on the 100th line and 1800 feet from the Range line, Section 36, Township 10S, Range 32E, NMPM.

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

SIGNED Lillian Jones TITLE Agent DATE APR 17 1969

APPROVED BY Joe A. Chavez TITLE SUPERVISOR DISTRICT 1 DATE APR 17 1969

CONDITIONS OF APPROVAL, IF ANY:

