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# NEW MEXICO DIVISION OF CONSERVATION COMMISSION

JUN 16 8 45 AM '69

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

|  |
|--|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br><b>K-6606</b>  |
| 7. Unit Agreement Name<br>-  |
| 8. Farm or Lease Name<br><b>State "6"</b>  |
| 9. Well No.<br><b>3</b>  |
| 10. Field and Pool, or Wildcat<br><b>Baum (Upper Penn)</b>   |
| 12. County<br><b>Lea</b>   |

|  |  |
|--|--|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><small>(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.)</small> |  |
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>  |  |
| 2. Name of Operator<br><b>Coastal States Gas Producing Company</b>   |  |
| 3. Address of Operator<br><b>P. O. Box 235, Midland, Texas 79701</b>   |  |
| 4. Location of Well<br>UNIT LETTER <b>L</b> , <b>1980</b> FEET FROM THE <b>south</b> LINE AND <b>660</b> FEET FROM THE <b>west</b> LINE, SECTION <b>6</b> TOWNSHIP <b>14S</b> RANGE <b>33E</b> NMPM.                           |  |
| 15. Elevation (Show whether DF, RT, GR, etc.)  |  |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

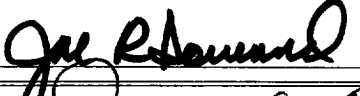
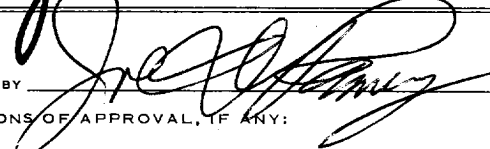
|  |   |  |   |
|--|---|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                         | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>               | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> | OTHER <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 1103.

**SPUD DATE: 5-15-69**

6-10-69: Ran 314 joints of 17# 5-1/2" casing set at 10,000'. Cemented with 200 sacks of Class "C" 1:1 Posmix, 2% gel, .5% CFR-2, 9# salt per sack. Plugged down at 5:45 a.m. Cement circulated. Tested casing with 1500#, held okay. WOC 52 hrs.

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

|   |  |                           |
|---|--|---------------------------|
| SIGNED       | TITLE <b>Division Production Manager</b> | DATE <b>June 13, 1969</b> |
| APPROVED BY  | TITLE <b>SUPV. OF DIVISION</b>           | DATE <b>JUN 16 1969</b>   |
| CONDITIONS OF APPROVAL, IF ANY:   |  |                           |