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# NEW MEXICO OIL CONSERVATION COMMISSION

MAY 28 11 45 AM '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-6606	

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 Coastal States Gas Producing Company	8. Farm or Lease Name State "1"
3. Address of Operator P. O. Box 235, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER <u>H</u> <u>1874</u> FEET FROM THE <u>North</u> LINE AND <u>554</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>14-S</u> RANGE <u>32-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Undes. Baum (Up. Penn.)
15. Elevation (Show whether DF, RT, GR, etc.) 5' GR	12. County Lea

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

Spud Date: 5-17-69

5-21-69: Ran 120 jts. of 8-5/8" 32 & 24# 8R casing set @ 4045'. Cmt'd. w/300 sx of Class "C", 2% gel. Tested casing w/1500#, held okay. PD @ 5 a.m. WOC 13 hrs.

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

SIGNED <u>Joe P. Demand</u>	TITLE <u>Division Production Manager</u>	DATE <u>5-26-69</u>
APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		