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NEW MEXICO OIL CONSERVATION COMMISSION

DEC 11 10 33 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-3846

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 MWJ Producing Company	8. Farm or Lease Name Baum "D" State
3. Address of Operator 413 First National Bank Building, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER J , 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 4 TOWNSHIP 14-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat Baum(Upper Penn)
15. Elevation (Show whether DF, RT, GR, etc.) 4232.3 GL	12. County Lea

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" 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.

Spudded 10:00 AM ON 12-5-69

Cemented 13-3/8", 48#, H40 casing @ 364' with 400 sacks. Cement circulated.

WOC 18 hrs. Test casing 500 psi for 30 minutes. Test O.K.

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

SIGNED R. Ken Williams TITLE VP DATE 12-9-69

APPROVED BY Leslie A. Clements TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

1000000000