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# NEW MEXICO OIL CONSERVATION COMMISSION

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.
L-529

## 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 "34"
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>1980</u> FEET FROM THE <u>north</u> LINE AND <u>710</u> FEET FROM <u>east</u> LINE, SECTION <u>34</u> TOWNSHIP <u>14S</u> RANGE <u>32E</u> NMPM.	10. Field and Pool, or Wildcat Undes. Tulk (Penn)
15. Elevation (Show whether DF, RT, GR, etc.) 4292.8' GR	12. County Lea

16.

## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input 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: 3-2-70**

**3-27-70:** Ran 318 jts 5-1/2" 17# J-55 and N-80 8rd LT&C csg set @ 10,050'. Cemented w/250 sxs Incor Poz w/2% gel, .5% CFR-2 and 9# salt/sx. Tested w/1500#. Held okay. PD @ 5:45 a.m. 3-27-70. WOC 72 hours.

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

SIGNED <u>Joe P. Howard</u>	TITLE <u>Division Production Manager</u>	DATE <u>March 30, 1970</u>
APPROVED BY <u>Joe P. Howard</u>	TITLE <u>SUPERVISOR OF DISTRICT</u>	DATE <u>APR 1 1970</u>
CONDITIONS OF APPROVAL, IF ANY:		