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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-110

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 "36"
3. Address of Operator P. O. Box 235, Midland, Texas 79701	9. Well No. 2
4. Location of Well UNIT LETTER F , 1980 FEET FROM THE north LINE AND 1980 FEET FROM THE west LINE, SECTION 36 TOWNSHIP 13S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Undes. Baum (Up. Penn)
15. Elevation (Show whether DF, RT, GR, etc.) 4292.6' GR	12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

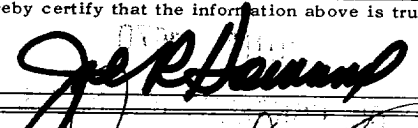
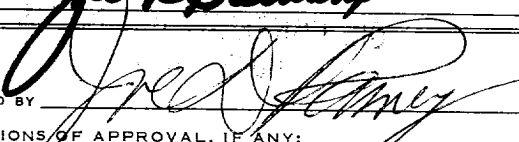
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	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: 5-4-70

5-31-70: Ran 5-1/2" 17# csg set @ 9950'. Cemented w/200 sxs Class "C", 1:1 Posmix w/2% gel, .5% CFR-2, 9# salt/sx. Tested w/1000#. Held Okay. PD @ 8:15 p.m. 5-31-70. WOC 72 hours.

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

SIGNED 	TITLE Division Production Manager	DATE June 2, 1970
APPROVED BY 	TITLE SUPERVISOR DISTRICT	DATE JUN 4 1970
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

JUN 3 1970

OIL CONSERVATION COMM.
HOBBS, N. M.