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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.	

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 TEXAS PACIFIC OIL CO., INC.		8. Farm or Lease Name VIKING STATE
3. Address of Operator P. O. Box 1069 - Hobbs, New Mexico 88240		9. Well No. 1
4. Location of Well UNIT LETTER A, 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 12-S RANGE 33-E NMPM.		10. Field and Pool, or Wildcat North Bagley Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4278' DF		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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Completion
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <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.

1. Moved in, service unit. Circulated hole clean with treated water.

2. Ran collar log 9562-8162'. Perforated 9537-9609' (16 holes)

3. Ran tubing and RTTS packer @ 9450'.; RBP @ 9650'.

4. Acidized with 1500 gal 15% MCA Overflush w/50 BP

5. Swabbed to flow. Tested.

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

SIGNED <u>CR Jilly</u>	TITLE <u>Area Production Foreman</u>	DATE <u>7-25-72</u>
APPROVED BY <u>John Runyan</u>	TITLE _____	DATE <u>JUL 26 1972</u>
CONDITIONS OF APPROVAL, IF ANY: Geologist		