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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 Fee

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 BRUNSON & MCKNIGHT	8. Farm or Lease Name M. McDonnold, Jr.
3. Address of Operator Box 297, Hobbs, NM 88240	9. Well No. 1
4. Location of Well UNIT LETTER D , 554 FEET FROM THE North LINE AND 554 FEET FROM THE West LINE, SECTION 35 TOWNSHIP 14 RANGE 35 NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevator (Show whether DF, RT, GR, etc.) 3995' 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"/>	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 checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
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.

1/19/73:
Ran 9 joints 12 3/4" 35# casing, set at 350', cemented with 350 sx Class C 2% CaCl, cement circulated. WOC 12 hrs. Tested to 600# 30 minutes with no pressure drop.

1/29/73:
Ran 221 joints 8 5/8" 32# J-55 casing, set at 3636', cemented with 300 sx Class C 2% CaCl, did not circulate. WOC 18 hrs. Tested to 1000# 30 minutes with no pressure drop.

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

SIGNED [Signature] TITLE _____ DATE **2/9/73**

APPROVED BY Joe D. Ramey TITLE _____ DATE **2/13/73**
Dist. I, Supv.

CONDITIONS OF APPROVAL, IF ANY: