

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 <input checked="" type="checkbox"/> WELL GAS <input type="checkbox"/> WELL OTHER- 2. Name of Operator Cabot Petroleum Corporation 3. Address of Operator P. O. Box 5001, Pampa, TX 79065 4. Location of Well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM <u>East</u> LINE, SECTION <u>4</u> TOWNSHIP <u>14S</u> RANGE <u>33E</u> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 4237' GR	7. Unit Agreement Name 8. Farm or Lease Name New Mexico 'U' State 9. Well No. 2 10. Field and Pool, or Wildcat Baum Upper Penn 12. County Lea
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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 type="checkbox"/>	PLUG AND ABANDONMENT <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 1503.

1. Drilled to 4150' T.D. Ran 8 5/8" 28# S80 ST&C casing to 4100', cemented with 1600 sacks Hall Lite with 15# salt, 5# gilsonite, 1/4# flocele and 200 sacks Hall 'C', 3# salt. Plug down at 12:25 pm MST 4/22/84.
2. After WOC 18 hours, tested with 1500# for 30 minutes. Tested o.k.

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

SIGNED Evelyn Farmer TITLE Agent DATE 4/27/84

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE _____

DATE APR 30 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
APR 30 1984
O.C.D.
HOBBS OFFICE