F OF OPIES RECEIVED	_1	-			Form C-103		
DISTRIBUTION					Supersedes O	Supersedes Old	
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION					C-102 and C-1 Effective 1-1-		
FILE							
U.S.G.S.					5a. Indicate Type	of Lease	
LAND OFFICE	\neg				State	Fee X	
OPERATOR					5. State Oil & Ga	s 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.)							
OIL GAS WELL WELL	OTHER- P&A	,			7. Unit Agreemen	t Name	
2. Name of Operator					8. Farm or Lease	Name	
CLAYTON W. WILLIAMS, JR. 3. Address of Operator					Tucker 9. Well No.		
200 Gulf Building, Midland, TX 79701					1 1		
4. Location of Well UNIT LETTER A 660 FEET FROM THE NORTH LINE AND 660 FEET FROM					10. Field and Pool, or Wildcat Wildcat		
THE East LINE, SECTION 14 TOWNSHIP 5S RANGE 32E NMPM.							
	//////	GR GR	DF, KI, GK, etc.)		Roosevelt		
Check	k Appropriate Box To In	idicate N	ature of Notice, Repor	t or Oth	er Data		
	INTENTION TO:				REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND AB	ANDON	REMEDIAL WORK		ALTERI	NG CASING	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		PEUG A	ND ABANDONMENT \overline{X}	
PULL OR ALTER CASING	CHANGE PLAN	.s []	CASING TEST AND CEMENT JOB				
			OTHER				
OTHER							
17. Describe Proposed or Completed	Operations (Clearly state all p	ertinent deta	ils, and give pertinent dates.	including	estimated date of s	torting any proposal	
work) SEE RULE 1103.	_			***************************************	communica date of s	turing any proposes	
	doned well as follo	ws (4-2)	28-76)				
a. 40 sxs 865				÷			
b. 50 sxs 782							
c. 50 sxs 668							
d. 50 sxs 445	0-4350						
e. 40 sxs 355	0-3450						
2. Cut off & pull	ed 8-5/8 csg @ 1041	L (6=18-	76)				
3. Plugged well (
a. 60 sxs 109	0-990						
b. 70 sxs 45	0-350						
c. 10 sxs @ s	urface						
d. Installed	DHM.						
18. I hereby certify that the information	on above is true and complete t	o the best of	my knowledge and belief.				
A = 0							
SIGNED + A	olido.	ope	rations Manager		8-27	7-76	
SIGNED	<i>j</i>	11CE			DATE 027		
2 40	aulen O		DIL & GAS INSPI	ECTO	P41 11	1 4 1978	
APPROVED BY		TITLE			DATE		
CONDITIONS OF APPROVAL, IF AN	iY: ノ						