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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

HUBBS OFFICE 0.400
MAY 31 8 11 AM '68

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

1. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-3610
7. Unit Agreement Name
8. Farm or Lease Name Phillips Texco State
9. Well No. 2
10. Field and Pool, or Wildcat Maljamar
12. County Lea

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>WIT</u>
2. Name of Operator Ryder Tools Management Company
3. Address of Operator 922 - 8th Street, Wichita Falls, Texas 76301
4. Location of Well UNIT LETTER <u>P</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>Sec</u> LINE, SECTION <u>2</u> TOWNSHIP <u>17</u> RANGE <u>32</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4266 DF

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

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.

5-9-68 Pulled 2175' casing.

Set cast iron bridge plug @ 37' 5", capped w/1 sack (1') cmt.

Set 25 sx cmt. @ casing stub @ 1982'.

Set 25 sx cmt. @ base of surface pipe.

Set 10 sx cmt. @ top of surface.

Set metal marker at well site.

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

SIGNED John Halsey

TITLE Agent

DATE May 29, 1968

APPROVED BY John v. Runyan

TITLE

DATE

CONDITION OF APPROVAL, IF ANY: