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LAND OFFICE	
OPERATOR	

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.
LC-029410A

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>Injection Well- Water</u>	7. Unit Agreement Name
2. Name of Operator	MCA Unit
3. Address of Operator	8. Farm or Lease Name
P.O. Box 460, Hobbs, N.M.	MCA Unit #12
4. Location of well	9. Well No.
UNIT LETTER <u>F</u> , <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM	10. Field and Pool, or Willcat
THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>17S</u> RANGE <u>32E</u> NMPM.	Majama BSA
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Notice of shut in water injection well.</u> <input checked="" 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 1703.

The referenced well was shut in 1-1-88 to back flow to relieve pressure, so that major well work can be performed in preparation of the MCA Unit CO₂ flood.

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

SIGNED R. J. Sexton for Dave Finney TITLE Administrative Supervisor DATE 1-26-88

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____

JAN 28 1988

CONDITIONS OF APPROVAL, IF ANY: FOR RECORD ONLY