|   |  | • • "              |                              |                              |                  |                          |                       |  |
|---|--|--------------------|------------------------------|------------------------------|------------------|--------------------------|-----------------------|--|
| NO. OF COPIES RECEIVED  |  |                    |                              |                              |                  | Form C-103<br>Supersedes |                       |  |
| DISTRIBUTION  |  |                    |                              |                              |                  | C-102 and C              |                       |  |
| SANTA FE  | NEW MEXICO OIL CONSERVATION COMMISSION |                    |                              |                              | N .              | Effective 1-             | 03                    |  |
| FILE  |  | ]                  |                              |                              | Г                | 5a. Indicate Typ         | ne of Lease           |  |
| J.S.G.S.  |  |                    |                              |                              |                  | State                    | Fee.                  |  |
| LAND OFFICE   |  |                    |                              |                              |                  | 5. State Oil & C         | as Lease No.          |  |
| OPERATOR  |  |                    |                              |                              |                  | E-81                     | 9                     |  |
|   |  |                    |                              |                              |                  | HIIII                    | HHHHH                 |  |
| 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.) |  |                    |                              |                              |                  |                          |                       |  |
|   | USE "APPLICA                           | CI.ON FOR PERMIT   |                              |                              |                  | 7. Unit Agreem           | ent Name              |  |
| OIL GAS OTHER-  |  |                    |                              |                              |                  | 8. Farm or Lea           | se Name               |  |
| 2. Name of Operator   |  |                    |                              |                              |                  | State E                  |                       |  |
| Charles B. Gillespie, Jr.   |  |                    |                              |                              |                  | 9. Well No.              |                       |  |
| 3. Address of Operator  |  |                    |                              |                              |                  | 4                        |                       |  |
| F   | O. Box                                 | 8, Midland         | d, Tx 79701                  |                              |                  | 10. Field and I          | Pool, or Wildcat      |  |
| Location of Well  |  |                    | North                        | 1980                         |                  | Saunders                 | Permo Penn            |  |
| UNIT LETTER   | <u> </u>                               | 660<br>            | T FROM THE                   | LINE AND                     | FEET FROM        | 777777                   |                       |  |
| East  | LINE, SEC                              | 9                  | 15:                          | S 33E                        | NMPM.            |                          |                       |  |
|   |  |                    | Elevation (Show whether      | DF, RT, GR, etc.)            |                  | 12. County               |                       |  |
|   |  |                    |                              | 3210 DF                      |                  | Lea                      |                       |  |
| 16.   | Chec                                   | k Appropriate      | Box To Indicate N            | Nature of Notice, R          | eport or Oth     | ier Data<br>REPORT O     | F:                    |  |
| NO  | TICE OF                                | INTENTION          | 10:                          |                              |                  |                          |                       |  |
| PERFORM REMEDIAL WOR  | к 🔲                                    |                    | PLUG AND ABANDON             | REMEDIAL WORK                |                  |                          | FERING CASING         |  |
| TEMPORARILY ABANDON   |  |                    | F                            | COMMENCE DRILLING OP         | 4                | 720                      | Aug Volument          |  |
| PULL OR ALTER CASING  |  |                    | CHANGE PLANS                 | CASING TEST AND CEMEN        |                  |                          | Í                     |  |
|   |  |                    |                              | OTHER                        |                  |                          |                       |  |
| OTHER   |  |                    |                              |                              |                  |                          |                       |  |
|   |  | (61-               | arly state all pertinent des | rails, and give pertinent of | lates, including | estimated date           | of starting any propo |  |
| 17. Describe Proposed work) SEE RULE 1  | or Completed<br>103.                   | 1 Operations (Clea | irty state att pertinent do. |                              |                  |                          |                       |  |
| work, see Roce.   | •                                      |                    |                              |                              |                  |                          |                       |  |
|   |  |                    |                              |                              |                  |                          |                       |  |
|   |  |                    |                              |                              |                  |                          |                       |  |
|   | m                                      | from 42001         | to surface, He               | 1d O.K.                      |                  |                          |                       |  |

- Casing Tested from 4200' to surface, Held O.K.
   Tubing and rods were run for production teste
   Well on Production 11-8-76

| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. |                  |  |  |
|--|------------------|--|--|
| May les & Lellespie 1 TITLE Operator   | 11-15-76         |  |  |
| SIGNED (MILLA 1) ZILL EGGE   | 201 507 <b>G</b> |  |  |
| Gas gines gad  | 1010             |  |  |
| APPROVED BY  | DATE             |  |  |

OIL Wyonou W. W.