.S. OF COPIES RECEIVED	Form C-103 Supersedes Old C-102 and C-103
DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
3241075	
F _ E	5a. Indicate Type of Lease
L.S.G.S.	State X Fee
LAND OFFICE	5. State Oil & Gas Lease No.
CPERATOR	B-2229
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO CHILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 100 NOT USE THIS FORM FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
USE PAPERCATION FOR PERSONAL PROPERTY.	7. Unit Agreement Name
GIL X GAS OTHER-	8, Farm or Lease Name
2. Name of Operator	Malmar Unit Tr. 4
Southland Royalty Company	9. Well No.
1. Accress of Operator 70701	15
1100 Wall Towers West, Midland, Texas 79701	10. Field and Pool, or Wildcut
4. Location of Well 660	Maljamar G-SA
UNIT LETTER 0 1980 East LINE AND FEET FROM THE EAST LINE AND	THITTINIAN "
South THE TOWNSHIP TOWNSHIP TOWNSHIP NAME NAME	** (
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Lea
N. A.	Orlean Data
Check Appropriate Box To Indicate Nature of Notice, Report or C	NT REPORT OF:
NOTICE OF INTENTION TO:	NI REPORT OF
	ALTERING CASING
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	PLUG AND ABANDONMENT
TEMPORARILI ABANDON	
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB COTHER Bradenhead Ti	e In X
other DL adeliliead 11	
OTHERL_J	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, included	ing estimated date of starting any proposed
work) SEE RULE 1103.	
Tied Bradenhead to Surface With Valve Exposed.	
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	•
15. I hereby certify that the information above is true and complete to the best of my knowledge and belief,	
15. I hereby certify that the information above is true and complete to the best of my	
Odamen Au District Engineer	2-15-79
SIEVED C. Planer Mr TITLE	
ON & GAS INSPEC	TOR MÅR 1.5.1979

CONDITIONS OF APPROVAL, IF ANY: