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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. B 2148

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- Water Injection Well	7. Unit Agreement Name
2. Name of Operator Pennzoil Company	8. Farm or Lease Name Western State
3. Address of Operator 1007 Midland Savings Bldg., Midland, Texas	9. Well No. 4
4. Location of Well UNIT LETTER H , 660 FEET FROM THE East LINE AND 1980 FEET FROM THE North LINE, SECTION 20 TOWNSHIP 17-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat Maljamar
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 Convert to Water Injection <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 1103.

1. Rigged up 5-6-65 and cleaned out well to T.D. 4488.
2. Washed O.H. 4228 - 4488 with 1000 gal. acid.
3. Checked well for injection rate.
4. Ran 131 jts. 2" plastic coated tubing with Baker Model A Packer, set Packer @ 4061'
5. Well ready for water injection.

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

SIGNED KEITH W. HARRISON TITLE Engineer DATE June 8, 1965

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: