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NO. OF COPIES RECEIVED		Form C-103 Supersedes Old
DISTRIBUTION		C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		5a. Indicate Type of Lease
U.S.G.S.		State XX Fee
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		5. State on a 5-2-2-1
(DO NOT USE THIS FORM USE "A	SUNDRY NOTICES AND REPORTS ON WELLS A FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVE APPLICATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)	or. 7. Unit Agreement Name
OIL XX GAS WELL	OTHER*	8. Farm of Lease Name
2. Name of Operator		
Union Oil Oi	Hume Queen Unit	
3. Address of Operator	s Pipe & Supply Company	45
c/o Eubbs	#5	
4. Location of Well	1000	Warman Oranga
UNIT LETTER	. 1980 FEET FROM THE SOUTH LINE AND 1980	FEET FROM HUME OFFER
THE East LIN	NE, SECTION STATE TOWNSH - STATE 34-E	NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4146 * KB	Lea
16.	Check Appropriate Box To Indicate Nature of Notice, Re	
	E OF INTENTION TO:	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON ALL WORK	ALTERING CASING PLUG AND ABANDONMENT
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS	· -
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT	

OTHER		OTHER		
Describe Proposed or Completed Operations (Clearly)	71 10	tails, and give pertinent dates	including estimated dat	e of starting any proposed
Describe Proposed or Completed Operations (Clearly swork) SEE RULE 1703.	state all pertinent ae	tatis, and give pertinent dutes,	the theory	, , , , , , , , , , , , , , , , , , ,
		7 2 20001	20461	
1. Propose to spot a 25 s 2. Propose to spot a 25 s	x. cement	plug from 3932° nlug ar 5 k " cas	-3948 . ing stub at	1400'.
3. Propose to spot a 25 s	x. cement	plus at 8 5/8"	casing shoe	at 300'.
4. Propose to spot a 10 s	x. cement	plus at surface	with marker	•
5. Hole will be loaded wi	th mud lad	en fluids.		
(Port, well)		•		
I hereby certify that the information above is true and	d complete to the bes	t of my knowledge and belief.		
IGNES ACAMINALIS	TITLE	Agent	DATE	10-5-70
0.0				•
John Russen	TITLE	े भा ं शक्कात	DATE	· · · · · · · · · · · · · · · · · · ·
PPROVED BY	TITCE			
ONDITION OF APPROVAL, IF ANY:				