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NOTICE

NEW MEXICO OIL CONSERVATION COMMISSION

SEP 27 8 15 AM '65

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Leonard Nichols	8. Farm or Lease Name G. W. Nickson
3. Address of Operator P.O. Box 123 Maljamar, New Mexico	9. Well No. A
4. Location of Well UNIT LATER 6 1900 FEET FROM THE North LINE AND 1900 FEET FROM THE East LINE, SECTION 15 TOWNSHIP 16 RANGE 35 NMPM.	10. Field and Pool, or Wildcat North Shoe Bar Devonian
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lee

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

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.

Pumped 25 sacks cement under Modle D. Baker packer set 12,516'

Shot 7" casing off at 8519' and pumped in 25 sacks cement 8500'.

Run 2-3/8" tubing in hole put in 25 sacks cement 7300'.

Put in 25 sacks cement at 6122'.

Put in 25 sacks cement at 4710' bottom of 9-5/8" casing.

Put in 9 sacks cement plug with 22' of 4" pipe marker in top of 9-5/8". 5' above ground level.

Work completed Sept. 10, 1965.

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

SIGNED *L.R. McCutcheon* TITLE **Supt.** DATE **9-22-65**

APPROVED BY *Leslie H. Clements* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

