NO. OF COPIES RECEIVED		•	Form C-103
DISTRIBUTION			Supersedes Old , C-102 and C-103
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee X
OPERATOR			5, State Oil & Gas Lease No.
			- minimum
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 GAS WELL WELL	OTHER-		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
Allen K. Trobaugh (formerly Western Natural Gas)			Eidson A-2
3. Address of Operator			9. Well No.
106 Wall Towers West, Midland, Texas 79701			1
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER C , 1980 FEET FROM THE WEST LINE AND 660 FEET FROM			Shoebar Devonian
north	35 169	35 F	
THE NORTH LINE, SECTION 35 TOWNSHIP 16S RANGE 35E NMPM			MPM. ()
15, Elevation (Show whether DF, RT, GR, etc.)			12. County
	3913 GR		Lea
16. Checl	Appropriate Box To Indicate 1	Nature of Notice Report or	
	INTENTION TO:		ENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
OTHER		OTHER Re-entry	operations x
		<u> </u>	
work) SEE RULE 1103.	Operations (Clearly state all pertinent des	tails, and give pertinent dates, inclu	ding estimated date of starting any proposed
12/27/76 - 2/3/77			
12/27/10 2/3/11			
Tied on to 5½" cas jts of new and use Cleaned out to 12,	unit and cleaned out ing @ 7864' w/Bowen 5 d 5½ 17# and 20# casi 693' and ran tubing tvered 544 bbls water p to P & A.	片" lead seal csg h ng. o 12,681' w/packer	
		·	
10.11			
18.1 nereby certity/that the information	on above is true and complete to the best	or my knowledge and belief.	
Clear of XI	The second	0	0 (0 (==
SIGNED CHENK VO	rig Signed by	Operator	DATE 2/8/77
To	rry Sexton		S _
16	is 1. Sept.		FEB 10 1966
APPROVED BY	YITLE		DATE IU 19/

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CONDITIONS OF APPROVAL, IF ANY: