

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator TOM L. INGRAM		8. Farm or Lease Name Eidson
3. Address of Operator P. O. Box 1757, Roswell, NM 88201		9. Well No. 1
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>35</u> TOWNSHIP <u>16S</u> RANGE <u>35E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat-Atoka
15. Elevation (Show whether DF, RT, GR, etc.) 3961 GR		12. County Lea

16.

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 ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

Examination of surface & intermediate csg. ☒

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.

Surface csg. (13-5/8") and intermediate csg. (9-5/8") inspected in cellar by New Mexico Department of Energy, Oil Conservation Division on February 21, 1979.

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

SIGNED Tom L. Ingram TITLE Operator

DATE 2/23/79

Orig. Signed By
Jerry Sexton

APPROVED BY Dist. 1, Supv.
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 2/23/79