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NEW MEXICO OIL CONSERVATION COMMISSION

JUN 6 12 41 AM '69

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>E-2929</b>

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 <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator <b>Cities Service Oil Company</b>	8. Farm or Lease Name <b>State BM</b>
3. Address of Operator <b>P. O. Box 69 - Hobbs, New Mexico 88240</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>K</b> , <b>1980</b> FEET FROM THE <b>West</b> LINE AND <b>1980</b> FEET FROM THE <b>South</b> LINE, SECTION <b>16</b> TOWNSHIP <b>15S</b> RANGE <b>36E</b> NMPM.	10. Field and Pool, or Wildcat <b>Caudill Devonian</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>39120F</b>	12. County <b>Lee</b>

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 ☐  
**Cancellation of Allowable** ☒

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.

This well was shut in October 14, 1968 after unsuccessful workover to recompleate in the Strawn. The well has now been recompleted in the Permo Penn formation and it is requested the allowable for the Caudill Devonian be cancelled.

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

SIGNED ORIGINAL SIGNED: G. D. ROBERTSON TITLE District Office Manager DATE June 5, 1969  
APPROVED BY [Signature] TITLE  DATE JUN 9 1969  
CONDITIONS OF APPROVAL, IF ANY: