-	,		
NO. OF COPIES RECEIVED		. \	Form C-103
DISTRIBUTION			Supersedes Old
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE	_ HOBBS OFF	ICE S. C. C.	
U.S.G.S.	_	ANA AMBA	5a. Indicate Type of Lease
LAND OFFICE	Fee 23 . 9	04 AM *\$5,	State Fee.
OPERATOR			5. State Oil & Gas Lease No.
SUND (DO NOT USE THIS FORM FOR PUSE "APPLIC!			
OIL GAS WELL WELL	OTHER-	CH PROPOSALS.)	7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
Socony Mobil Of	Barbara Owens		
3. Address of Operator			9. Well No.
Box 1475, Lovin	gton, New Mexico		1
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER	660 FEET FROM THE West	LINE AND 660 FEET FRO	Dean-Permo Penn
THE South LINE, SECTION 35 TOWNSHIP 15 S RANGE 36E NMPM.			
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
DF 3872			LEA
Check	Appropriate Box To Indicate N	Nature of Notice, Report or O	ther Data
NOTICE OF	INTENTION TO:		T 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 TEMPOTATI	y abandoned
17. Describe Proposed or Completed C	perations (Clearly state all pertinent details	nils, and give pertinent dates, includin	g estimated date of starting any proposed
work) SEE RULE 1103.		,	s commerce water of starting any proposed

18. I hereby certify that the information above is true and complete	e to the best of my knowledge and belief.	
SIGNED TYPE	TITLE Intermediate Clerk	
CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE