CONDITIONS OF APPROVAL, IF ANY	DATE
ORIGINAL A. GARRAN CONTRACTOR APPROVED BY: ER CORD BY AREA CONTRACTOR APPROVED BY:	The state of the s
Authorized Agent	1-25-68
and belief,	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
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3	
w/ 1 JSPF, total 23 holes, well started to flow after per Flowing to test tank, CP 300.	of. SD for nite.
CIBP in $5\frac{1}{2}$ csg @ 11,600, then dumped 12 gals hydromite or equals PBTD, then perf $5\frac{1}{2}$ csg in the Penn @ 11,209-216, 1	11,262-268 & 11,316-325
1/23 Western Co ran GR-Collar-Corr log from 4700 to 11,900, the	nen set Baker
J. C. MAXWELL #7, 12,61/1 TD.	
1/22 MI & steamed string of 2-3/8 tbg, ran 4-5/8 bit & csg scr tbg to 11.619. pulled bit & scraper. SD for nite. Prep	raper on 2-3/8
1/20 12,614 TD. MIRU Baber Well Serv DD Unit, inst'l BOP. SD for nite.	
AFE 7004 - Mobil Intr 100% - Est Cost \$21,000.	· producer:
J. C. MAXWEIJ. #7, 990' FNL & 330' FEL Sec 27, T-14-S, R-37-E Lea Co, NM. OBJECTIVE: Recomplete TA Devonian well to Penr	E, Denton Dev Fld,
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, includwork) SEE RULE 1103.	ing estimated date of starting any propose
OTHER RECOMPLETE	
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
SUBSEQUE	INT REPORT OF:
Check Appropriate Box To Indicate Nature of Notice, Report or ONOTICE OF INTENTION TO:	Other Data
3820 Gr.	Lea
15. Elevation (Show whether DF, RT, GR, etc.)	12, County
THE East LINE, SECTION 27 TOWNSHIP 14-S NAME 37-E NAME	
UNIT LETTER A . 990 FEET FROM THE North LINE AND 330 FEET FR	Denton
4. Location of Well	10. Field and Pool, or Wildcat
P. O. Box 633, Midland, Texas 79701	9. Well No.
Mobil Oil Corporation	J. C. Maxwell
2. Name of Operator	8. Farm or Lease Name
OIL YY GAS	7. Unit Agreement Name
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIP. (DO NOT USE THIS FORM FOR PROPOSALS.)	
	5, State Oil & Gas Lease No.
OPERATOR OPERATOR	State X Fee
U.S.G.S.	5a. Indicate Type of Lease
SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
DISTRIBUTION	Form C-103 Supersedes Old
NO. OF COPIES RECEIVED	

CONDITIONS OF APPROVAL, IF ANY