NO. OF COPIES RECEIVED			•	.		
DISTRIBUTION		•			Form C-103 Supersedes Old	
SANTA FE	NEW MEXIC	NEW MEXICO OIL CONSERVATION COMMISSION		C-102 and C-103		
FILE		O OIL CONSERVATION	COWWI22ION	Effective 1-1-	-65	
U.S.G.S.				5a. Indicate Type	41	
LAND OFFICE				State X		
OPERATOR	7	•		5. State Oil & Go	Fee	
	- J	•		0G-60		
SHND	PY NOTICES AND DE	DODTS ON WELLS		mmm	mmmm	
SUND LOO NOT USE THIS FORM FOR PLUSE "APPLICA	ROPOSALS TO DRILL DE TO DEE	FUNIS ON WELLS EPEN OR PLUG BACK TO A DIFFI	ERENT RESERVOIR.			
				7. Unit Agreemer	Name	
OIL X GAS WELL	OTHER-			Tigracine.	ii ladine	
2. Name of Operator				8. Farm or Lease	Name	
Tenneco Oil Company				Mesa Queen		
3. Address of Operator			•	9. Well No.		
1860 Lincoln St., Su	lite 1200, Denver	, Colorado 80203	3	. 12		
4. Location of Well					10. Field and Pool, or Wildcat	
UNIT LETTER J	1980	South	1980	Mesa Qu		
	_	·		mmin'	mmm	
THE East LINE, SECTION 17 TOWNSHIP 16S RANGE NMP						
	15. Elevation (Show whether DF, RT, GR,	etc.)	12. County	7111111	
		4355 DF		Lea		
Check	Appropriate Box To	Indicate Nature of No	otice Report of Ot	her Dota		
NOTICE OF I	INTENTION TO:	. 1		T REPORT OF:		
-			0000000011	TREFORT OF:		
PERFORM REMEDIAL WORK	PLUG AND	ABANDON REMEDIAL WO	ork .	ALTER	ING CASING	
TEMPORARILY ABANDON		COMMENCE DE	RILLING OPNS.		IND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PL		AND CEME T JOB	7204 A	NO ABANDONMENT	
		OTHER		Shut In	[J	
OTHER				1100 211	LA	
17 Deposits Deposed of Completed C	(6) 1	<u></u>				
17. Describe Proposed or Completed C work) SEE RULE 1103.	perations (Clearly state all	pertinent details, and give p	pertinent dates, including	estimated date of s	starting any proposed	
Status of Well:	In active waterf	lood.				
outus of hell.					•	
Approximate Date tha	t Temp. Aband Co	ommenced.	•			
rippi on made bade dia	o remp. Aban. oc	mmericed.				
Reason for Temp. Aba	nd.:		·			
					. •	
Future Plans for Wel	1:	•	•			
		•	•			
Approximate Date of	Future W.O. or PI	lugging:				
•						
a						
•				•	— /	
			(' . '	11.1	- 16	
		•	Expire	21/0/	1 10	
			YHYIF V			
			•			
18. I hereby certify that the information	a above is true and complete	to the best of my knowledge	e and belief.			
A A ma			•			
SIGNED 14 11 11 11 12 13	/	Div. Product	tion Manager	DATE [1-10	1-25	
				NO	$\sqrt{1 - 1}$	
APPROVED BY		TITLE		DATE		

CONDITIONS OF APPROVAL, IF ANYI