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SANTAFE	NEW MEXICO OIL CONSERVATION COMMISSION		C-102 and C-1 Effective 1-1-		
FILE					
U.S.G.S.			5a. Indicate Type	est Lease	
LAND OFFICE	-		State X	Fee	
OPERATOR			5, State Oil & Ga		
or environ			E-41		
CLINIC	DV NOTICES AND DEDODES O	. we le	innn -	mmin	
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.)					
OIL X GAS WELL	OTHER•		7, Unit Agreemen	t Name	
D. Detroit Contractor			8, Farm or Lease	8, Farm or Lease Name	
Coastal States Gas Producing Company			Mesa	Mesa Gulf	
3. Address of Operator			9. Well No.		
P. O. Box 2498, Abilene, Texas				1	
4. Location of Well					
				10. Field and Pool, or Wildcat	
UNIT LITTER E 660 FEET FROM THE West LINE AND 1650 FEET FROM				Mesa Queen	
THE North LINE, SEC	THI North LINE, SECTION 20 TOWNSHIP 16-S RANGE 32-E NMPM				
	15. Elevation (Show whether	r DF, RT, GR, etc.)	12. County	MILLIAN	
	4353	.4' GR	Lea	dilllll.	
Charl	<u> </u>		D .		
	Appropriate Box To Indicate				
NOTICE OF	INTENTION TO:	SUBSEQUE	NT REPORT OF:		
<u></u>					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER	ING CASING	
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG A	NO ABANDONMENT	
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB			
		OTHER			
OTHER					
17. Describe Proposed or Completed	Operations (Clearly state all pertinent de	tails, and give pertinent dates, includir	ng estimated date of s	tarting any proposed	
work) SEE RULE 1109.	•				
SPUD DATE: 6/1	9/65				
	37 03				
June 28, 1965:					
Perforated 4-첫"	casing from 3403 -	08' with two jet sho	ots/ft.		
Well treated wi	th 200 gallons of ac	id and completed as	shown on	•	
Form C-104.	3	1			
roim c-104.					
18. I hereby certify that the information	n above is true and complete to the best	of my knowledge and belief.		 · · · · · · · · · · · · · · · · · · 	
\sim \wedge d					
(NO PHOU	uank P	roduction Superinter	ident Ju	ne 30, 1965	
SIGNED	TIPLE T		ACTION TE UU		
LAX	10				
ABBROVED AV	1/1/16x2 2/				

CONDITIONS OF APPROVAL, IF ANY: