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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Eidson "C" WN
9. Well No. 3
10. Field and Pool, or Wildcat Shoe Bar Penn
12. County Lea

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"/>
2. Name of Operator Sinclair Oil & Gas Company
3. Address of Operator P. O. Box 1920, Hobbs, New Mexico
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>West</u> LINE AND <u>2310</u> FEET FROM THE <u>North</u> LINE, SECTION <u>26</u> TOWNSHIP <u>16S</u> RANGE <u>35E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

1-13-66 to 1-14-66

Ran 8-5/8"OD 24 and 32# J-55 and H-40 casing and cement w/1825 sacks cement, (1125 sks. Incor Class C 50/50 Pos. plus 8% Gel, plus 5% TIC #2, plus 32# Salt. Slurry wt. 13.5#, 500 sks. Incor 50/50 Pos. plus .25% TIC, 32# salt per. sack. slurry wt. 14#, 200 sks. Incor Neat Wt. 14.8#. Cement did not circulate. Temp. survey Ind. Top of Cement @ 2390'. WOC 24 hrs. Pressure tested casing to 1000# for 30 mins. Tested OK.

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

SIGNED [Signature] TITLE Superintendent DATE 1-14-66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Orig:2cc: OCC hobbs, cc: Regional Office, cc: Partner, cc: file