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LAND OFFICE	
OPERATOR	

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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-5301
7. Unit Agreement Name
8. Farm or Lease Name Sunray State
9. Well No. 1
10. Field and Pool, or Wildcat No. Anderson Ranch
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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole
2. Name of Operator Burleson & Huff
3. Address of Operator Box 935, Midland, Texas 79701
4. Location of Well UNIT LETTER C 990 FEET FROM THE north LINE AND 2310 FEET FROM THE west LINE, SECTION 2 TOWNSHIP 16S RANGE 32E N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.) GR 4310.1

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIATION WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Intention to Plug & Abandon. On 204-67 a TD of 9900 feet was reached without finding oil or gas production. Our plans are to place cement plugs as follows:

25 sx. at 9900
25 sx. at 8900
25 sx. at 6900
25 sx. at 5650
25 sx. at 4300
25 sx at 3450
10 sx. at surface with 4" by 4" marker

No. pipe will be pulled. Location will be cleaned up and restored to the original contour.

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

SIGNED *[Signature]* TITLE Partner DATE 2-13-67

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: