NO. OF COFIES RECEIVED		Form C-103
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION D. C. C.	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION 2. C. C.	Effective 1-1-65
FILE	May 15 10	
u.s.g.s.	May 15 19 20 34 100	5a. Indicate Type of Lease
LAND OFFICE		State X Fee.
OPERATOR		5. State Oil & Gas Lease No.
		***************************************
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL ON TO DESPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)		
	CATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
OIL K GAS WELL	OTHER. Dry Hole	7. Ont Agreement Name
2. Name of Operator	OTHER- DITY MOTE	8. Farm or Lease Name
Cities Service	Oil Company	State CK
3. Address of Operator		9. Well No.
P. D. Box 69 -	Hebbs, New Mexico 88240	1
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER 6	2040 FEET FROM THE NOTTH LINE AND 1930 FEET FROM	Lovington East
THE East LINE. SE	ECTION 19 TOWNSHIP 165 RANGE 37E NMPM	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3848 DF	res ////////////////////////////////////
Chec	ck Appropriate Box To Indicate Nature of Notice, Report or Ot	her Data
NOTICE OF	FINTENTION TO: SUBSEQUEN	T REPORT OF:
		·
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARIL" ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JQB	
	OTHER	
OTHER		
	d Operations (Clearly state all pertinent details, and give pertinent dates, including	g estimated date of starting any proposed
work) SEE RULE 1103.		
TO 11400 Strawn	Left tool open 2 hours   HH 5218,   SIP 831 in 12	hours, IFP 831.
(B 11400 \$61 amil	got door open a marro till berey total species	
EED 831, ESID 85	5, 11 hours FHP 5218. BHT 185. Recover 1500 wa	ter blanket and
PP 031, P31P 03	2) 12 mail till baret bill tobe keeper the	
1201 drilling mu	d. No show oil or gas. Dry Hole. Preparing to	Plug and Abandon.
120 Citiving me	at the state of th	
	at an in the same and complete to the best of our leasured and an in-	
· · · · · · · · · · · · · · · · · · ·	tion above is true and complete to the best of my knowledge and belief.	
ORIGINAL SI ☐ D. ROBER		um. 11. 1060
SIGNED	TITLE District Office Manager	DATE May 14, 1969
		6.77
1.00		MAY 19 Isod
APPROVED BY	J'threy TITLE	DATE
CONDITIONS OF APPROVAL, IF	ANY;	
′ /		
1/		