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HOBBS OFFICE D. C. 8
NEW MEXICO OIL CONSERVATION COMMISSION
APR 15 11 33 AM '69

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. 2330
7. Unit Agreement Name
8. Farm or Lease Name State "B" 2330
9. Well No. 1
10. Field and Pool, or Wildcat
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- <u>Drilling</u>
2. Name of Operator <u>Jake L. Hamon</u>
3. Address of Operator <u>Box 663, Dallas, Texas 75221</u>
4. Location of Well UNIT LETTER <u>C</u> , <u>1977.7</u> FEET FROM THE <u>West</u> LINE AND <u>560'</u> FEET FROM THE <u>North</u> LINE, SECTION <u>31</u> TOWNSHIP <u>16-S</u> RANGE <u>36-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <u>3932.5' GR</u>

16.

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 JQB <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.

Drilled 12-1/4" hole to 4250'

Ran 103 jts. of 36 & 40# 9-5/8" J55, R3, STC New Casing and set at 4250' K.B.
Cemented with 300 sacks Regular plus 4% gel and 200 Sacks Regular Neat plus 2%
CaCl. P.D. 6:00 A.M 4-10-69.

WDC 36 hrs. and tested casing to 2000# for 30 minutes with no pressure loss.

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

SIGNED [Signature] TITLE Clerk DATE 4-14-69
APPROVED BY [Signature] TITLE _____ DATE APR 16 1969
CONDITIONS OF APPROVAL, IF ANY:

