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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.	
L-1503	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Coastal States Gas Producing Company		State "2"
3. Address of Operator		9. Well No.
P. O. Box 235, Midland, Texas 79701		1
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER <u>W</u> <u>660</u> FEET FROM THE <u>south</u> LINE AND <u>1980</u> FEET FROM		Wildcat
THE <u>east</u> LINE, SECTION <u>2</u> TOWNSHIP <u>16S</u> RANGE <u>34E</u> NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
4085' GR		Lea

16.

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
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.

Production casing was set in this well @ 10,775' and perforated 10,622-32'. The well was not an economical producer and is to be plugged and abandoned as follows:

1. 25 sxs across perfs.
2. 25 sxs @ 5-1/2" stub.
3. 25 sxs @ top of Abo @ 7970'.
4. 25 sxs @ top of Glorieta @ 6130'.
5. 25 sxs @ 8-5/8" shoe.
6. 25 sxs @ 8-5/8" stub.
7. 25 sxs @ 13-3/8"
8. 10 sxs @ top.
9. DHM

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

SIGNED Joe L. Hammond TITLE Division Production Manager DATE December 3, 1969
APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE 12/3/69
CONDITIONS OF APPROVAL, IF ANY: