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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 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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'		Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER <input 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.

SPUD DATE: 8-23-69

11-6-69: Ran 338 jts 5-1/2", 17#, N-80 LT&C csg set @ 10,775'. Cmdt w/300 sxs Class "C"  
1:1 Posmix, 2% gel, .5% CFR<sub>2</sub>, 9# salt/sack. PD @ 6:00 p.m. Tested csg w/1900#,  
held okay. WOC 48 hrs.

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

SIGNED Joe R. Hammond TITLE Division Production Manager DATE 11-7-69  
APPROVED BY Joe R. Hammond TITLE  DATE   
CONDITIONS OF APPROVAL, IF ANY: