

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
J.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
		5. State Oil & Gas Lease No.
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Testing		7. Unit Agreement Name
Name of Operator Green & Michaelson Producing Co.		8. Farm or Lease Name Burson
Address of Operator 314 Building of the Southwest, Midland, Texas 79701		9. Well No. 1
Location of Well UNIT LETTER C , 1900 FEET FROM THE West LINE AND 467 FEET FROM THE North LINE, SECTION 28 TOWNSHIP 16S RANGE 38E NMPM.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 3713 Gr.		12. County Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>		COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER Perforating and treatments <input type="checkbox"/>	

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.

8-15-71 Perforated 4 ½ casing with 24 hole size. 42 tested with 500 gals. mud acid. Swabbed back
8-16-71 Flowed back 4 hrs. S.D. rain.
8-17-71 S.D. rain.
8-18-81 Treated perforation above with 7500 gal. acid. Swabbed.
8-19 to 8-23-71 Flowing on various size chokes to frac tank.

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

SIGNED *[Signature]* TITLE Vice President DATE 8-23-71

APPROVED BY *[Signature]* TITLE SUPERVISOR DISTRICT I DATE AUG 25 1971

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 2 1971

OIL CONSERVATION COMM.
HOBBBS, N. H.