NO. OF COPIES RECEIVED	4	Form C+103
DISTRIBUTION	-	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE U.S.G.S.		5a, Indicate Type of Lease
LAND OFFICE	-	State Fee X
OPERATOR		5, State Oil & Gas Lease No.
		
SUNI (DO NOT USE THIS FORM FOR USE "APPLIC		
I. OIL GAS WELL WELL	OTHER. Dry Hole	7. Unit Agreement Name
2. Name of Operator V-F Petroleum		8, Farm or Lease Name
3. Address of Operator 1212 Vaughn Building, Midland, Texas 79701		Allen 9. Well No.
1212 Vaugnn Bullali	ng, Midiand, lexas /9/UI	
• -	1650 FEET FROM THE West LINE AND 660 FEET	10. Field and Pool, or Wildcat Wildcat
	TION TOWNSHIP RANGE	THIRD THE
THE LINE, SEC	TION TOWNSHIP RANGE	MPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		Lea
	k Appropriate Box To Indicate Nature of Notice, Report o	r Other Data JENT REPORT OF;
PERFORM REMEDIAL WORK	PLUG AND ABANDON THE REMEDIAL WORK	ALYERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	OTHER	
OTHER		
17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, inc	uding estimated date of starting any proposed
•	total depth of 10,932'. No oil or gas was fou	nd in commercial
We propose to plug wel	l as follows:	
Plug #1 (Bottom) 10,900	0' 100' 30 sx.	
Plug #2 (Abo) 8,280	0' 100' 30 sx.	
Plug #3 (Glorieta)6,384	4' 100' 30 sx.	
Plug #4 (8-5/8" casing)		
Plug #5 (8 - 5/8" stub) ⁻	1,100° 89° 50 SX.	
Plug #6 (Surface Casing	g) 400' 89' 50 sx.	
No plug will be put at to convert this well to water supply well will	surface of 12-3/4" casing at the request of loa water supply well for irrigation purposes. follow.	and owner. He has plans Your forms for this
10 11 11 11 11 11 11 11		
18. I nereby certify that the information	ion shove is true and complete to the best of my knowledge and belief.	
SIGNED 11. Flance	V. F. Vasicek TITLE Co-owner	DATE 5-1-72
	Orig. Signed by TITLE	DATE MAY 3 1972
APPROVED BY	/ L. Kamen	DATE TIME OFF
CONDITIONS OF APPROVAL, IF A	Dist. I, Supv.	

RECEIVED

OA CONSERVATION COMM.
HOBBS, N. M.