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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 ☐   Fee ☒

5. State Oil & Gas Lease No.

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 ☒   GAS WELL ☐   OTHER-

7. Unit Agreement Name

2. Name of Operator

C & K Petroleum, Inc.

8. Farm or Lease Name

Shipp "27"

3. Address of Operator

607 Midland National Bank Bldg., Midland, Texas 79701

9. Well No.

1

4. Location of Well

UNIT LETTER __O__, __1980__ FEET FROM THE __East__ LINE AND __660__ FEET FROM

THE __South__ LINE, SECTION __27__ TOWNSHIP __16-S__ RANGE __37-E__ NMPM.

10. Field and Pool, or Wildcat

Wildcat

15. Elevation *(Show whether DF, RT, GR, etc.)*

3775.8 Gr.

12. County

Lea

16.
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐   PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐   CHANGE PLANS ☐

OTHER _____ ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☒   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER _____   ☐

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.

Spudded 8 a.m. 10-23-74
Drilled 17-1/2" hole to 470'. Set 13-3/8", 65#, K-55 csg at 470'. Cemented with 450 sx Class H. Cement circulated to surface. Plug down at 6:45 p.m. 10-24-74. WOC 20 hrs. tested csg with 1000# for 30 min. Held OK.
Drilled 11" hole to 4712'. Set 8-5/8", 32# and 24#, J-55 csg at 4712'. Cemented with 400 sx Lt. Wt. cement, 18% salt followed with 200 sx Cl-H, 2% CaCl. Plug down at 5:00 a.m. 11-5-74. Ran temp. survey, found top cement outside pipe 2850'. WOC 23 hrs. tested csg. with 1500#, Held OK.

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

SIGNED _____   TITLE Administrative Supervisor   DATE 1-15-75

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: