NO. OF COPIES RECEIVED				Form C-103	
DISTRIBUTION		tuna -		Supersedes O C-102 and C-	
SANTAFE	NEW MEXICO OIL CONSERVATION COMMISSION C.			Effective 1-1-	
FILE			- •		
U.S.G.S.		JUL 23 11 2 2 /	H ton	5a. Indicate Type	
LAND OFFICE		11 26 1	แร	State	Fee. 🕱
OPERATOR				5. State Oil & Go	is Lease No.
<u> </u>				**********	
SUN (DO NOT USE THIS FORM FOR	DRY NOTICES AND REPORTS PROPOSALS TO DRILL OR TO DEEPEN OR PI CATION FOR PERMIT -" (FORM C-101) FOR	ON WELLS	ERVOIR.		
USE "APPLI	CATION FOR PERMIT -** (FORM C-101) FOR	SUCH PROPOSALS.)		7. Unit Agreemer	nt Name
OIL GAS	OTHER-			/. Omit rigiconic.	n name
2. Name of Operator	UTHER*			8. Farm or Lease	e Name
Cities Service	011 Company			Fee MA	11811
3. Address of Operator				9. Well No.	
P. O. Box 69 -	Hobbs, New Mexico			1	
4. Location of Well				10. Field and Po	ool, or Wildcat
UNIT LETTER	1980 FEET FROM THE NORT	h 198	FEET FROM	Maljamer (Grayburg SA
•					
THE EAST LINE, SEC	CT10N 70WNSHIP	178 RANGE 338	NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)				12. County	
	39	96 DF		Lea	_//////////////////////////////////////
16. Chec	k Appropriate Box To Indicat	e Nature of Notice,	Report or Otl	n er Data	
NOTICE OF	INTENTION TO:		SUBSEQUENT	REPORT OF:	:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTER	RING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING O	PNS.	PLUG A	AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMI	ENT JOB		<u></u>
OTHER Cancel Allowa	ble	OTHER			
OTHER COINCE! ATTOM	<u></u>				
17. Describe Proposed or Completed	Operations (Clearly state all pertinent	t details, and give pertinent	dates, including	estimated date of	starting any proposed
work) SEE RULE 1103.					
				-11	
The above well	was temporary abandone	d on 6-20-68 plea	ase cance!	#1 (CM#D (6	
	40				
effective 8-1-	68.				
10 I bosobu oodifu that the informati	ion above is true and complete to the	pest of my knowledge and bo	lief.		
18. I hereby certify that the informat	ion above is true and complete to the b	est of my knowledge and be	lief.		
18. I hereby certify that the informat			lief.		lv 22 1948
18. I hereby certify that the informat	ion above is true and complete to the b		lief.	_ DATE JU	ly 22, 19 6 8
المنافعة الم			lief.	. DATE JU	ly 22, 1968
SIGNED	TITLE	District Clerk			ly 22, 1968
				_ DATE	ly 22, 1968