	No. of the Control of	_
NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		4 4 00
U.S.G.S.	12.4 14.4	5a. Indicate Type of Lease
LAND OFFICE	and the second s	State 🗶 Fee.
OPERATOR		5. State Oil & Gas Lease No.
		B-2516
SUNDRY	Y NOTICES AND REPORTS ON WELLS	
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ON FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS		7. Unit Agreement Name
WELL WELL	OTHER- Shut In oil well	S. M. G. S. A. U.
Name of Operator		8. Farm or Lease Name
Cities Service	Oil Company	Tract 6
. Address of Operator		9. Well No.
Box 69, Hobbs,	New Mexico 88240	2
. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER N. 6	50 FEET FROM THE SOUTH LINE AND 1980 FE	ET FROM Maljamer (G-SA)
	••	
THE LINE, SECTION	29 TOWNSHIP 178 RANGE 33E	_ NMPM.
mmmm	The state of the s	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4046° GR	F00 /////////
NOTICE OF IN	ppropriate Box To Indicate Nature of Notice, Report	or Uther Data QUENT REPORT OF:
	308320	QUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
		
OTHER	- Convolt Co	vater injection x
work) SEE RULE 1603.	rations (Clearly state all pertinent details, and give pertinent dates, in	acluding estimated date of starting any propose
The shows well was con-	verted to a water injection effective: 12-20	nest with the following
THE SPOYE WELL WES CON	reference a mater fill entroll ellertiants.	o-of with the following
equipment installed:		
edurbment moternos.		
1. 131 its. (3949	51) 2 3/8" 00 4.7# 8R J-55 cement lined tul	hing set @ 20451
10 131 3 400 (334)	, i a pro way 41/4 on g-33 compile titled cut	pring sec to 22-2.
2 70 Culherson I	NMC-1 packer set @ 39451.	
2. / 44:50:50:1	ard-, become see to 32-2 ;	
First water was injecte	ed with an average injection pressure of it	EDO# # Pata of 275 B/D
files made made injude	The section will be a section of the section of the	your to take or all by
on 12-20-67.		
. I hereby certify that the information at	pove is true and complete to the best of my knowledge and belief.	
ORIGINAL SIGNE	P. Marian	
№. D. RCo:	ta aa kunkiison	
IGNED	TITLE District Clerk	DATE 1-30-68

TITLES 1 1858 7

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

AR PAR