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NEW MEXICO OIL CONSERVATION COMMISSION

JUL 5 9 42 AM '67

Form O-10  
Superseded by  
O-10-1 (Rev. 1-66)

SUNDRY NOTICES AND REPORTS

(DO NOT USE THIS FORM FOR APPLICATIONS TO DRILL OR TO REFINISH OR TO RE-ENTER A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - OIL, GAS, OR OTHER.)

|                                                                             |  |                                                                              |  |
|-----------------------------------------------------------------------------|--|------------------------------------------------------------------------------|--|
| 1. Name of Operator                                                         |  | 2. Name of Operator                                                          |  |
| 3. Address of Operator                                                      |  | 4. Address of Operator                                                       |  |
| 5. Location of Well                                                         |  | 6. Location of Well                                                          |  |
| 7. Elevation (Show whether DP, RT, GR, etc.)                                |  | 8. Elevation (Show whether DP, RT, GR, etc.)                                 |  |
| 9. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data |  | 10. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data |  |

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

|                       |                  |                               |                         |
|-----------------------|------------------|-------------------------------|-------------------------|
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK                 | ALTERING CASING         |
| TEMPORARILY ABANDON   | CHANGE PLANS     | COMMENCE DRILLING OPER.       | PLUG AND RE-ABANDONMENT |
| WELL BY ALTER CASING  | OTHER            | GRINDING TEST AND CEMENT JOBS | OTHER                   |

17. Describe Proposed or Completed Operations (Clearly state all pertinent data, and give pertinent dates, including estimated date of starting any operations.) SEE RULE 1153.

NO. 4704  
PROVID. 4004

Note for possible secondary recovery

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

|              |       |       |      |
|--------------|-------|-------|------|
| SIGNED       | DATE  | TITLE | DATE |
| John J. Hurd |       |       |      |
| APPROVED BY  | TITLE | DATE  |      |
|              |       |       |      |

CONDITIONS OF APPROVAL, IF ANY: