NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	et al. 2. C.	Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State 📕 Fee
OPERATOR		5. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR I USE **APPLIC	DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL GAS WELL WELL	OTHER-	7, Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
m-1337 - m-1 - 3	0	
3. Address of Operator	Company	9. Well No.
Recm B-2, Phillips	Building, Odessa, Texas	46
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER C,	3301 FEET FROM THE North LINE AND 19801 FEET FROM	Vacuum-San Andres
THEWOSL LINE, SEC	TION TOWNSHIP RANGE 35E NMEM	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
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	15. Elevation (Show whether DF, RT, GR, etc.) 4600 DF A Appropriate Box To Indicate Nature of Notice, Report or Ot INTENTION TO: PLUG AND ABANDON REMEDIAL WORK	12. County Lea her Data T REPORT OF: ALTERING CASING
PERFORM REMEDIAL WORK	15. Elevation (Show whether DF, RT, GR, etc.) 4600 DF A Appropriate Box To Indicate Nature of Notice, Report or Ot INTENTION TO: PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS.	12. County Lea her Data T REPORT OF: ALTERING CASING
PERFORM REMEDIAL WORK	15. Elevation (Show whether DF, RT, GR, etc.) LGOO! DF A Appropriate Box To Indicate Nature of Notice, Report or Ot INTENTION TO: PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. CHANGE PLANS CASING TEST AND CEMENT JQB	12. County Lea her Data T REPORT OF: ALTERING CASING
Check NOTICE OF PERFORM REMEDIAL WORK	15. Elevation (Show whether DF, RT, GR, etc.) LGOO! DF A Appropriate Box To Indicate Nature of Notice, Report or Ot INTENTION TO: PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. CHANGE PLANS CASING TEST AND CEMENT JQB	12. County Lea her Data T REPORT OF: ALTERING CASING PLUG AND ABANDONMENT

Well temporarily abandoned

(Please cancel allowable effective 6-1-66)

le la			
18. I hereby certify that the information above is true and complet-	e to the best of my knowledge and belief.		
SIGNED W.J Mueller	TITLE Associate Reservoir Engineer	DATE	6-1 -66
APPROVED BY	7 ITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY:			