

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-7653
7. Unit Agreement Name
8. Farm or Lease Name STATE "AN"
9. Well No. 4
10. Field and Pool, or Wildcat VACUUM ABO, REEF
12. County LEA

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator GETTY OIL COMPANY
3. Address of Operator P.O. BOX 249, HOBBS, NEW MEXICO 88240
4. Location of Well UNIT LETTER H , 1650 FEET FROM THE NORTH LINE AND 990 FEET FROM THE EAST LINE, SECTION 7 TOWNSHIP 18-S RANGE 35-E NMPM.

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

3975' D.F.

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER **FILL CELLAR WITH SAND** ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Installed risers to ground level on all strings. Attached permanent identification tags to each. Filled cellar with sand. Job completed February 27, 1976.

NOTE: Cellar inspected before filling on February 25, 1976 by Mr. John Runyon w/NMOCC.

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

ORIGINAL SIGNED BY:

SIGNED **C.L. Wade:****C. L. Wade**TITLE **AREA SUPERINTENDENT**DATE **2-27-76**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: