NO. OF COPIES RECEIVED	HUI	BBS OFFICE O. C. C. SATES COMUSSION	Form C-103 Supersedes Old C-102 and C-103 Effective 1-1-65
U.S.G.S.	-		5a. Indicate Type of Lease
	-1		State 🗴 Fee
OPERATOR	-		5. State Oil & Gas Lease No.
· · · · · · · · · · · · · · · · · · ·			E-6624
(DO NOT USE THIS FORM FOR P USE "APPLIC.			
1.			7. Unit Agreement Name
	OTHER-		
2. Name of Operator	8. Farm or Lease Name		
W. K. Byrom			State 24
3. Address of Operator			9. Well No.
Bo	2		
4. Location of Well	<u>x 147 - Hobbs, N. M. 88240</u>		10. Field and Pool, or Wildcat
UNIT LETTERD	660 FEET FROM THE North	LINE AND FEET FROM	Arkansas Junction Queen
THE West line, sec	TION 24 TOWNSHIP 185		
	15. Elevation (Show whether I	DF, RT, GR, etc.)	12. County
	3779.4 GL		Lea
^{16.} Check	Appropriate Box To Indicate N	ature of Notice, Report or Ot	her Data
NOTICE OF	INTENTION TO:	SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🛣	REMEDIAL WORK	ALTERING CASING
OTHER	□		

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.

Verbal permission to plug was given by Mr. Eric F. Engbrecht to W. K. Byrom. Our plans are to:

Fill hole with drilling mud and place 25 sack plug at 4600-4300 to cover the perforations. Run a free point and shoot off casing. Pull casing. Run a 25 sack plug at 1156; 25 sack plug at 809 and 10 sack plug to surface to hold 4" x 7' marker. Clean location.

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

SIGNED R.R. anderson		TITLE Office Mgr.	DATE 3-14-66
5			
APPROVED BY	, IF ANY:	TITLE	DATE