NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	SERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fe <b>g</b>
OPERATOR			5. State Oil & Gas Lease No.
SUNDR (DO NOT USE THIS FORM FOR PRO USE "APPLICATI	Y NOTICES AND REPORTS ON POSALS TO DRILL OR TO DEEPEN OR PLUG E ION FOR PERMIT -** (FORM C-101) FOR SUC	WELLS BACK TO A DIFFERENT RESERVOIR. CH PROPOSALS.)	
1. OIL GAS WELL WELL	OTHER-		7. Unit Agreement Name
2. Name of Operator			8. Farm or Lease Name
Polaris Production C	orp.		Shipp "A"
3. Address of Operator			9. Well No.
P. O. Box 1749 Mi	dland, Texas 79701		
4. Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER B 1	650 FEET FROM THE North	LINE AND 990 FEET FROM	Hobbs (Grb-San Andres)
THE West LINE, SECTIO	DN 23 TOWNSHIP 18-S	RANGENMPM	//////////////////////////////////////
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
	3691 DF		Lea
<sup>16.</sup> Check A	Appropriate Box To Indicate N	Nature of Notice, Report or Ot	her Data
NOTICE OF IN			T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	
OTHER Hobbs Casing Lea	k Survey		
		<u> </u>	

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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.

A casing leak survey was performed on Shipp "A" Well #1 on July 10, 1974, in the following manner. A pressure gauge was placed on the surface casing outlet and the valve opened up. The pressure gauge showed no pressure on the casing.

18. I hereby certify that the signed signed states	the information above (is true and comp	plete to the best of my knowledge and belief. Petroleum Engineer Agent TITLE	. DATE	74
APPROVED BY		TITLE	DATE	· · · · · · · · · · · · · · · · · · ·
CONDITIONS OF APPRO	DVAL, IF ANY:			