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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name	
2. Name of Operator Continental Oil Company		8. Farm or Lease Name GRIMES	
3. Address of Operator Box 460, Hobbs, New Mexico		9. Well No. 6	
4. Location of Well UNIT LETTER <u>J</u> 1980 FEET FROM THE <u>EAST</u> LINE AND 1980 FEET FROM THE <u>SOUTH</u> LINE, SECTION <u>28</u> TOWNSHIP <u>18-S</u> RANGE <u>38-E</u> NMPM.		10. Field and Pool, or Wildcat Brewers 7 Rivers Area	
15. Elevation (Show whether DF, RT, GR, etc.) 3642' DF		12. County Lea	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

It is proposed to plug & abandon this well by the following procedures.

Spot a 25 sx cmt plug from TD (3255') to cover perfs from 3236' to 3249'. Fill well with 10# mud & place a 10 sx plug at surface. Cap well with dry hole marker & restore location.

NM OCC - 3

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

SIGNED <u>M. E. [Signature]</u>	TITLE <u>Administrative Section Chief</u>	DATE <u>12-2-70</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>CHIEF OF BUREAU</u>	DATE <u>12-2-70</u>
CONDITIONS OF APPROVAL, IF ANY:		