| · · · · · · · - · - · · · · · · · · | | | | Form C-103 |
|--|--|--|--|---|
| NO. OF COPIES RECEIVED | | | | Supersedes Old |
| DISTRIBUTION | | | O MARCELONI | C-102 and C-103 |
| SANTA FE | NEW MEXICO | OIL CONSERVATION C | OMMISSION | Effective 1-1-65 |
| FILE | | No. 12 | | 5g. Indicate Type of Lease |
| U.S.G.S. | 3-000 | Nov 12 11 | 10 AN PEE | State Fee. X |
| LAND OFFICE | l-File | | HI QJ | 5. State Oil & Gas Lease No. |
| OPERATOR | | | | 5. State on a dis Lotio in |
| SUN (DO NOT USE THIS FORM FOR USE "APPLI | DRY NOTICES AND REL PROPOSALS TO DRILL OR TO DEE CATION FOR PERMIT - " (FORM C | PORTS ON WELLS PEN OR PLUG BACK TO A DIFFER -101) FOR SUCH PROPOSALS.) | ENT RESERVOIR. | 7. Unit Agreement Name |
| I. OIL GAS WELL WELL | OTHER- | | | a Deventance Name |
| 2. Name of Cylertter Tidewate | r Oil Company | | | 8. Farm or Lease Name W. D. Grimes |
| 3. Address of Operator | ······································ | | ······································ | 9. Well No. |
| | Hobbs, New Mexico | | | 1 |
| 4. Location of Well | | | · · · · · · · · · · · · · · · · · · · | 10. Field and Pool, or Wildcat |
| UNIT LITTER | -30 | South | 330 | Bowers Seven Rivers |
| UNIT LITTIR | FEET FROM THE | LINE AND | | <u>, , , , , , , , , , , , , , , , , , , </u> |
| THE West LINE, SE | CTION 29 TOWNS | HIP 18-5 RANGE | 38-E NMPM | |
| mmmmmm | 15. Elevation (| Show whether DF, RT, GR, e | etc.) | 12. County |
| | | | | Lea AllIIIII |
| Chee | ck Appropriate Box To | Indicate Nature of No | otice, Report or Ot | ther Data |
| | F INTENTION TO: | | SUBSEQUEN | T REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND | | | ALTERING CASING |
| TEMPORARILY ABANDON | | | RILLING OPNS. | |
| PULL OR ALTER CASING | CHANGE P | | AND CEMENT JOB | x |
| ОТНЕR | | | | |
| | (0) 1 1 1 1 1 | I and give | nertinent dates includin | g estimated date of starting any proposed |

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.

Well shut pending study for remedial work or abandonment

•

| 8. I hereby certify that the information above is true and Original Signed By | complete to the best of my knowledge and belief. | |
|--|--|----------------------|
| GNED C. L. WADE | TITLE Area Supt. | DATE <u>11-10-65</u> |
| | Englister in some | 6 27 20 8955 |
| PROVED BY | TITLE | |