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NEW MEXICO OIL CONSERVATION COMMISSION

3 - NMOCC
1 - File

APR 17 1967

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

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/>	Fee <input 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 TIDEWATER OIL COMPANY	8. Farm or Lease Name State "A"
3. Address of Operator P. O. Box 249, Hobbs, New Mexico	9. Well No. 9
4. Location of Well UNIT LETTER I 1650 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 18-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat Vacuum Devonian
15. Elevation (Show whether DF, RT, GR, etc.) 3975 DF	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

Tubing collapsed and stuck at approximately 5970', unable to pull. Indicated casing collapsed. We propose to recover tubing, swage out casing and squeeze with cement if necessary.

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

SIGNED C. J. [Signature] TITLE Area Superintendent DATE 4-18-67

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: