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LAND OFFICE	
OPERATOR	

# 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.	
7. Unit Agreement Name	
8. Farm or Lease Name <b>Hobbs-Cone-Townsite</b>	
9. Well No. <b>1</b>	
10. Field and Pool, or Wildcat <b>Hobbs</b>	
12. County <b>Lea</b>	

**SUNDY 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. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
**Robert B. Holt and A. G. Kaspar**

3. Address of Operator  
**801 First National Bank, Midland, Texas**

4. Location of Well  
UNIT LETTER **J**, **2260** FEET FROM THE **East** LINE AND **1650** FEET FROM  
THE **South** LINE, SECTION **21** TOWNSHIP **18-S** RANGE **38-E** NMPM.  
15. Elevation (Show whether DF, RT, GR, etc.)  
**3647 KB**

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input 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"/>	

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.

**Acidize w/300 gal.**  
**Displace to clean up bore hole.**  
**Commence remedial work January 31, 1967.**

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

SIGNED: Robert B. Holt TITLE: Operator DATE: 5/22/67

APPROVED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: