

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

HOBBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION

Nov 23 11 09 AM '65

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. E-1582
--

7. Unit Agreement Name

8. Farm or Lease Name State Lea 403
--

9. Well No. 7

10. Field and Pool, or Wildcat Undesignated
--

12. County Lea

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Sinclair Oil & Gas Company
3. Address of Operator P. O. Box 1920, Hobbs, New Mexico
4. Location of Well UNIT LETTER 0 735 FEET FROM THE South LINE AND 2055 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 18S RANGE 35E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

REMEDIAL WORK	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>
ALTERING CASING	<input type="checkbox"/>
PLUG AND ABANDONMENT	<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.

Set 3990' of 9-5/8" CD casing 32 & 36# J-55 & H-40 and cemented w/1750 sacks wt 13.3 (1000 sks. 50/50 Pos plus 8% Gel. 38# Salt plus .05% TIC), (550 sks. 50/50 Pos. (Class C) plus 25% TIC), (200 sks. Incor Class C Neat cement). Cement Circulated. WOC 24 hrs. Tested with 1000# pressure for 30 mins. Tested OK.

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

SIGNED [Signature] TITLE Superintendent DATE 11-22-65

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&2cc: OOC Hobbs, cc: REC, Jr. cc: file