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NEW MEXICO OIL CONSERVATION COMMISSION
 REC'D OFFICE O.C.C.
 DEC 11 12 41 PM '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. B-5310

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"/>	7. Unit Agreement Name
2. Name of Operator Cities Service Oil Company	8. Farm or Lease Name State CD
3. Address of Operator Box 69 - Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER L , 2310 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE, SECTION 32 TOWNSHIP 17S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Maljamar (G-SA)
15. Elevation (Show whether DF, RT, GR, etc.) Est. 3950 GR	12. County Lea

16. 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 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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL UP ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" 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.

T.D. 329 Red Bed Prep to drill ahead. The above well was spudded @ 11:30 A.M. on 12-8-65. Ran 10 Jts. (315') of 8 5/8" O.D. 24# casing set @ 328' cemented w/300 sacks reg. cement. Plug down @ 4:20 P.M. on 12-8-65. Circulated cement. WOC for 24 hrs. Tested 8 5/8" casing w/600 psi for 30 minutes with no drop in pressure.

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

SIGNED C. Robertson TITLE District Clerk DATE 12-10-65

APPROVED [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: