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NEW MEXICO OIL CONSERVATION COMMISSION.

JAN 27 1 19 PM '66

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

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|--|
| 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. 8 |
| 10. Field and Pool, or Wildcat South Vacuum Devcnian |
| 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 K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 22 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:

| | |
|--|---|
| PERFORM REMEDIAL WORK <input 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 JOBS <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.

1-11-66 Ran 5-1/2"OD 17 and 20# N-80 casing set @ 11,780' and cemented w/400 sacks Incor
Pos plus 2% Gel plus 8# salt per. sack plus 3/4 of 1% CFR₂ friction reducer slurry
wt. 15#. WOC 24 hrs.
1-12-66 Pressure tested casing to 1000# for 30 min. Tested O.K.

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 1-26-66

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

Orig&2cc: OCC Hobbs, cc: West Texas Regional Office, cc: State Land Office, cc: file