

NO. OF COPIES RECEIVED _____
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 OPERATOR _____
 OPERATOR'S NAME _____
 OPERATOR'S ADDRESS _____
 OPERATOR'S PHONE _____

NEW MEXICO OIL CONSERVATION COMMISSION

Form O-103
 Supersedes O-1
 O-102 and O-103
 Effective 1-1-68

SUNDY NOTICES AND REPORTS ON WELLS

NOT USE THIS FORM FOR REPORTS ON WELLS DRILLED OR TO BE DRILLED IN A DIFFERENT RESERVOIR, OR APPLICATION FOR PERMIT TO REFRACTURE A WELL OR TO REPAIR A WELL.

1. WELL TYPE ☐ OIL WELL ☐ GAS WELL ☐ OTHER _____
 2. OPERATOR'S NAME Midland Oil Corporation
 3. ADDRESS, PHONE P.O. Box 633, Midland, Texas
 4. LOCATION OF WELL
 SECTION P 460 FEET FROM RT LINE AND 660 FEET FROM RT LINE
 TOWNSHIP 34 RANGE 34-E

5. TYPE OF NOTICE 20
 6. DATE OF NOTICE 12
 7. DATE OF REPORT 12
 8. DATE OF PERMIT 12
 9. DATE OF COMPLETION 12
 10. DATE OF CLOSURE 12
 11. DATE OF RE-ENTRY 12
 12. DATE OF RE-ENTRY 12
 13. DATE OF RE-ENTRY 12
 14. DATE OF RE-ENTRY 12
 15. DATE OF RE-ENTRY 12
 16. DATE OF RE-ENTRY 12
 17. DATE OF RE-ENTRY 12
 18. DATE OF RE-ENTRY 12
 19. DATE OF RE-ENTRY 12
 20. DATE OF RE-ENTRY 12

15. Elevation (Show whether DT, 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 ☐ TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐ OTHER ☐
 PLUG AND ABANDON ☐ CHANGE PLANS ☐ OTHER ☐
 REMEDIAL WORK ☐ COMMENCE DRILLING OPNS. ☐ CASING TEST AND CEMENT JOBS ☐ OTHER ☐
 ALTERING CASING ☐ PLUG AND ABANDONMENT ☐

17. Description of Nature of Complete Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Change Proposed Depth 10,500' as Shown on C-101, to 10700'

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

SIGNED BY [Signature] TITLE Authorized Agent
 SIGNED BY [Signature] TITLE Operator
 CONDITIONS OF APPROVAL, IF ANY: 2-1
 DATE FEB 16 1968