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NEW MEXICO OIL CONSERVATION COMMISSION

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. |
| 061633 |

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 | East EK Unit |
| Continental Oil Company | 8. Farm or Lease Name |
| 3. Address of Operator | East EK Unit |
| P. O. Box 460, Hobbs, New Mexico 88240 | 9. Well No. |
| 4. Location of Well | 8 |
| UNIT LETTER <u>H</u> , <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM | 10. Field and Pool, or Wildcat |
| THE <u>East</u> LINE, SECTION <u>22</u> TOWNSHIP <u>18S</u> RANGE <u>34E</u> NMPM. | East E-K Queen |
| 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| 4003.5 GR | Lea |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Shut-In ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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 1703.

Status of Well: Shut-In

Approximate date that temp. aban. commenced: 12-25-73

Reason for temp. aban.: Uneconomic

Future plans for Well: Holding for use as water injection well.

Expires 11/1/75

Approximate date of future W.O. or plugging: Fall, 1976

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

SIGNED Robert F. [Signature] TITLE Division Office Manager

DATE 10/30/74

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: