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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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-2229

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 SMGSAU
2. Name of Operator Cities Service Company	8. Farm or Lease Name Tract 4
3. Address of Operator Box 1919 Midland, TX 79702	9. Well No. 10
4. Location of Well UNIT LETTER F 2615 FEET FROM THE North LINE AND 1420 FEET FROM THE West LINE, SECTION 29 TOWNSHIP 17S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Maljamar (G-SA)
15. Elevation (Show whether DF, RT, GR, etc.) 4066.4' 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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER Witnessed casing leak survey & identification of above ground connections from casingheads. <input checked="" 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 1103.21

Dug out cellar. Installed riser to surface from one valve on each casinghead. Installed a second valve on each riser above ground and properly identified each, as required and witnessed by NMOCD. Melvin Crossland with NMOCD witnessed and approved the installations. Backfilled cellar.

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

SIGNED E. Fuller TITLE Region Operations Manager DATE 3/9/79
APPROVED BY M. Crossland TITLE OIL & GAS INSPECTOR DATE MAR 13 1979
CONDITIONS OF APPROVAL, IF ANY: