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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-2516

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	8. Farm or Lease Name
Cities Service Company	Tract 6
3. Address of Operator	9. Well No.
Box 1919, Midland, TX 79702	7
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER <u>K</u> <u>1455</u> FEET FROM THE <u>South</u> LINE AND <u>1330</u> FEET FROM	Maljamar (G-SA)
THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>17S</u> RANGE <u>33E</u> N.M.P.M.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4052.5' GR	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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER <input 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 3900' SD. & Dolo. Waiting on completion unit. Drld to a T.D. of 3900' in SD & Dolo. Ran & set 97½ jts (3889.20') 5½" OD 17# K-55 csg @ 3900' & cmtd with 600 sacks Halco Lite w/5# salt/sack + 200 sacks Class C Neat cmt. Plug down @ 1735 MDT on 8/19/80. Bumped float w/1500# - held ok. Had full circulation throughout job. ND BOP. Set slips, cut off csg & installed well head.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>E. Smith</u>	TITLE <u>Region Oper. Mgr.</u>	DATE <u>8/21/80</u>
APPROVED BY <u>Larry Serian</u>	TITLE <u></u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		