

# NEW MEXICO OIL CONSERVATION COMMISSION

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

COPIES RECEIVED		
DISTRIBUTION		
DATE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-4287	

## 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 L-1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL <input checked="" type="checkbox"/> WELL GAS <input type="checkbox"/> WELL OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator		West Lovington Unit
3. Address of Operator		8. Farm or Lease Name
P.O. BOX 728, HOBBS, NEW MEXICO 88240		West Lovington Unit
4. Location of Well		9. Well No.
UNIT LETTER <u>E</u> , 1980 FEET FROM THE <u>North</u> LINE AND 660 FEET FROM		10. Field and Pool, or Wildcat
THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>17S</u> RANGE <u>36E</u> NMPM.		Lovington San Andres West
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
3923' DF		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:

REMEDIATION WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐  
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 1103.

### REMARKS

1. WELL STATUS - Shut-In Oil
2. TEMPORARY ABANDONMENT DATE - January, 1974
3. REASON FOR ABANDONMENT - Water Breakthrough

4. FUTURE PLANS - A larger pumping unit is to be installed.

5. DATE OF FUTURE WORKOVER OR PLUGGING - December, 1974

*Expires 10/1/75*

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

SIGNED <u>[Signature]</u>	TITLE <u>Asst. Dist. Supt.</u>	DATE <u>10-18-74</u>
APPROVED BY <u>Joe D. Ramey</u> Dist. I. Supv.	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		