NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	HOPPY CONSERVATION COMMISSION C. C.	Supersedes Old
DISTRIBUTION	\circ	C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE	FEB [] [1 43 1.11 766	
U.S.G.S.	· · · · · · · · · · · · · · · · · · ·	5a. Indicate Type of Lease
LAND OFFICE	30	State X Fee
 		
OPERATOR		5. State Oil & Gas Lease No.
SUNDRY	Y NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROP USE **APPLICATION	Y NOTICES AND REPORTS ON WELLS DISALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. DIS FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
1.		7. Unit Agreement Name
OIL V GAS		
WELL A WELL	OTHER-	
2. Name of Operator		8. Farm or Lease Name
SOCONY MOBIL OIL	COMPANY, INC.	State "P"
3. Address of Operator		9. Well No.
P. O. Box 1800, Hobbs, New Mexico		3
4. Location of Well		10. Field and Pool, or Wildcat
	′′′′	
UNIT LETTER B	660 FEET FROM THE North LINE AND 1980 FEET FRO	Vacuum (G-SA)
	,	
East	26 TOWNSHIP 17S RANGE 35E NMP	
THE LINE, SECTION	TOWNSHIP RANGE NMP	« (() (((((((((((((((((
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3921 GR	
	3921 '3n'	Lea
Check A	ppropriate Box To Indicate Nature of Notice, Report or O	ther Data
NOTICE OF INT		IT REPORT OF: ,
1101102 01 1111	Subsequer	IT REPORT OF: ,
		
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
	other Temporari	ly Abandoned x
OTHER		zy madrida (r.)
OTHER.		
17. Describe Proposed or Completed Open	rations (Clearly state all pertinent details, and give pertinent dates, includin	a estimated date of starting any proposed
work) SEE RULE 1105.	, , , , , , , , , , , , , , , , , , , ,	g commerce and of orange and proposing
PB 4565 *		
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studying for poss	orpre morkover.	
	,	
10 I beachy costifu that the information of		
10. I hereby certify that the imprimation at	bove is true and complete to the best of my knowledge and helief.	
/ nereby certify that the information at	bove is true and complete to the best of my knowledge and belief.	
C I W		
SIGNED CERTIFY THAT THE INFORMATION AND	title Group Supervisor	1-1-66
of ten		DATE 1-1-66

CONDITIONS OF APPROVAL, IF ANY: