·	·		•	Form C-103
NO. OF COPIES RECEIVED	<u> </u>	. •		Supersedes Old
DISTRIBUTION	•	TOU COUNT	CCION	C-102 and C-103 Effective 1-1-65
SANTA FE	NEW WEXICO C	IL CONSERVATION COMMI	331014	
FILE			Şa	. Indicate Type of Lease
U.S.G.S.			·	State Fee.
LAND OFFICE			5.	State Oil & Gas Leasa No.
OPERATOR	<u> </u>		` .	
	DATE OF AND DEDC	DTS ON WELLS		
(DO NOT USE THIS FORM FOR PR	RY NOTICES AND REPORTION FOR PERMIT -" (FORM C-1)	ORTS ON WELLS N OR PLUG BACK TO A DIFFERENT R OI) FOH SUCH PROPOSALS.)	ESERVOIN . 7.	Unit Agreement Name
OIL X WELL	OTHER-			Farm or Lease Name
2. Name of Operator		•		Lovington-State /
Consolidated Oil &	Gas, Inc.			. Well No.
3. Address of Operator	- D Colora	do 80203	·	1 🗱
	t, Denver, Colora			0. Field and Pool, or Wildcat
4. Location of Well		south 500	O FEET FROM	Midway Abo
UNIT LETTERM	500 FEET FROM THE	SOUTH LINE AND		
	Q .	17S RANGE 37	7E	
THE West LINE, SEC				
mmmmmmm	15. Elevation (Sh	ow whether DF, RT, GR, etc.)	1	2. County
	37	70 G.L.		Lea
Check NOTICE OF	Appropriate Box To In Intention To:	ndicate Nature of Notice	SUBSEQUENT F	T Data REPORT OF: ALTERING CASING
PERFORM REMEDIAL WORK	PLUG AND AR		님	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	•	COMMENCE DRILLIN	1 1	
PULL OR ALTER CASING	CHANGE PLA	other Ten	nporary Aband	doned Status[>
•				
OTHER				etimated date of starting any propose
17. Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly state all	pertinent details, and give pertir	ient dater, including e	stimuted dots of contrast
This well was abaeconomical rate. area and would ut is to be flooded.	indoned in January Consolidated is p ilize this well in th	, 1968 after production lanning a waterflood ne secondary recove	tion had declind feasibility stery operations	ned to an un- oudy for this of the field
				. •
•				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•				
	•			
		.\.		A second second
			•	
•	_ ~			
	Gxpires	5 10/1/75		·
•		•		
18. I hereby certify that the informa-	etion shave is true and complet	te to the best of my knowledge a	ind belie:	
18. I hereby certify that the informa	Withit shows to ries and assistant			O + 1E 107/
· 01.0 M	transich.	Area Product	ion Manager	Oct. 15, 1974
SIGNED TOTAL				
	Orig. Signed by Joe D. Ramov			DATE