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# 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.
A-1320

## 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
HUMBLE OIL & REFINING COMPANY	New Mexico State <del>WPA</del>
3. Address of Operator	9. Well No.
Box 2100, Hobbs, New Mexico 88240	28
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER "A" 330 FEET FROM THE North LINE AND 330 FEET FROM	Vacuum Glorieta
THE East LINE, SECTION 32 TOWNSHIP 17-S RANGE 35-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3966 D. F.	Lea

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 <input checked="" type="checkbox"/> Install Pumping Unit	

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.

Pumping unit installed during April 1965.

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

SIGNED E. S. Davis TITLE District Adm. Supvr. DATE 5-10-65

APPROVED BY  TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY: