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NEW MEXICO OIL CONSERVATION COMMISSION

SEP 21 3 21 PM '65

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
7. Unit Agreement Name -
8. Farm or Lease Name N. M. State <u>W</u>
9. Well No. 32
10. Field and Pool, or Wildcat Vacuum Glorieta
12. County Lea

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"/>	2. Name of Operator HUMBLE OIL & REFINING COMPANY	3. Address of Operator Box 2100, Hobbs, New Mexico 88240	4. Location of Well UNIT LETTER "M" 330 South 330 THE West LINE, SECTION 28 TOWNSHIP 17-S RANGE 35-E NMPM.	15. Elevation (Show whether DF, RT, GR, etc.) 3957' D.F.
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data				

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <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 July, 1965.

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

SIGNED E. H. Harris TITLE District Adm. Supvr. DATE Sept. 23, 1965

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: