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NEW MEXICO OIL CONSERVATION COMMISSION
N.M.C.C.

MAR 3 11 22 AM '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. B-1527

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 Socony Mobil Oil Company, Inc.	8. Farm or Lease Name State "K"
3. Address of Operator Box 1800, Hobbs, New Mexico	9. Well No. 9
4. Location of Well UNIT LETTER <u>J</u> <u>1980</u> FEET FROM THE <u>East</u> LINE AND <u>2110</u> FEET FROM THE <u>South</u> LINE, SECTION <u>31</u> TOWNSHIP <u>17S</u> RANGE <u>35E</u> N.M.P.M.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3975' GR	12. County Lea

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 JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Forster Drilling Company commenced drilling operations at 12:30 PM 2-18-65 (Spud date)
Set 1545' of 29# 8 5/8" casing at 1545'. Cemented w/850 sx Incor 4% gel + 50 sx Incor
Neat 2% HA-5 & 1/4#/sx flocele. Plug down at 3:00 AM 2-21-65. Cement circulated.
WOC 18 hours. Tested 8 5/8" casing w/1000# for 30 minutes. Tested OK.

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

SIGNED A. J. McDaniel TITLE Group Supervisor DATE 3-2-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: