		73% 184		Form C-103		
NO. OF COPIES RECEIVED		<b>9</b>		Supersedes O	)ld	
DISTRIBUTION	Section 1 to the second section 1	**************************************		C-102 and C-	103	
SANTA FE	NEW MEXICO OF GERS	ELEMANDE NICONMISSION		Effective 1-1-	65	
FILE	Charles of the Control of the Contro	ł.				_
U.S.G.S.	Nov 28	11 06 W 98		Sa. Indicate Type		
LAND OFFICE	INA EO	11 00 1		State X	Fee. []	
OPERATOR				5, State Oil & Ga	n Lease No.	
	-			26	.5	
SLINDS	RY NOTICES AND REPORTS ON	WELLS		VIIIIII		1
(DO NOT USE THIS FORM FOR PRI	OPOSALS TO DRILL OR TO DEEPEN OR PLUG B	ACK TO A DIFFERENT RESERVOIR H PROPOSALS.				/
1.				7. Unit Agreemen	nt Name	_
OIL X GAS WELL X	OTHER.				_	
2. Name of Operator				8. Farm or Lease Name		
Marathon Oil Company				Staplin S	tate A/C 1	
3. Address of Operator				9. Well No.		
P. O. Box 220, Hobbs, New Mexico						
4. Location of Well				10. Field and Pool, or Wildcat		
lacksquare				Vacuum San Andres		
UNIT LETTER K . 1750 FEET FROM THE West LINE AND 1650 FEET FROM					mmmm	~
	200	2 4 7				/
THE South LINE, SECTI	on 30 TOWNSHIP 178	RANGE 35E	NMPM-			/
		DE DE CE		77777777	<del>7,111111</del>	7
	15, Elevation (Show whether			12. County		/
	KB 3996			Lea	_//////////////////////////////////////	7
Check	Appropriate Box To Indicate N	ature of Notice, Repo	rt or Otl	ier Data		
	NTENTION TO:	•		REPORT OF:	:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTER	RING CASING	٦
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.			AND ABANDONMENT	Ħ
	CHANGE PLANS	CASING TEST AND CEMENT JO	x	, 444 ,		
PULL OR ALTER CASING	CHANGE FEARS		, L		۲	٦
		OTHER				
OTHER			,			
17. Descrire Frugosed or Completed O	perations (Clearly state all pertinent dete	ails, and give pertinent dates	including	estimated date of	starting any propose	d
work) SEE RULE 1103.						
15.5#, 8Rd thd., depth including Backer Casing cemented w	" hole 11-15-66. TD 4750 J-55, LT&C casing from 8. aker Flex Flo Collar (1.6 ith 1500 sxs Trinity Lite arface. Bottom 400' and	.00' below KB to 4 66') and Baker Gui e Wate, followed w	739.44 de Show ith 350	' with sett: e (.83'). O sxs Incor	ing •	
DD00 1200:	W 0 0 1.9 has male 2	4+h 0000# 4 00				
ADIR #155.	W.O.C. 48 hrs. Tested v	11 01 2000# 101 30	ш±11-р :	TOTA O.V.		
					•	
	Character to the control of the cont	of marks and - 2 11 11 5				_
18. I hereby certify that the information	above is true and complete to the best of	or my knowledge and belief.				
(1)	L					
SIGNED KASTURELE	TITLE F	rea Supt.		. DATE 11-	21-66	
						=
	€ '					
سنست						

CONDITIONS OF APPROVAL, IF ANY: