NO. OF COPIES RECEIVED	_			Form C-103	
DISTRIBUTION	_			Supersedes Old	
SANTA FE	NEW MEXICO OF	L CONSERVATION CO	MMISSION	C-102 and C-103 Effective 1-1-65	
	_				
U.S.G.S.	_			5a. Indicate Type of Lease	
OPERATOR	_			State X Fee	
O. ERATOR				5. State Oil & Gas Lease No.	
CLUID				B-1520	
(DO NOT USE THIS FORM FOR P	ORY NOTICES AND REPORT OF THE PROPERTY OF THE	TS ON WELLS			777
1.	ATION FOR PERMIT -** (FORM C-101	FOR SUCH PROPOSALS.)	T RESERVOIR.		////
OIL GAS WELL	OTHER+			7. Unit Agreement Name	
2. Name of Operator	·				
Mahilail Carparation				8. Farm or Legse Name 72 St	ute
3. Address of Operator	-			9. Well No.	
Mahil ail Carparation  3. Address of Operator  Boy 633, Midland, Devan 79701  4. Location of Well				9. Well No.	
4. Location of Well	1			10. Field and Pool, or Wildcat	
UNIT LETTER D. 660 FEET FROM THE MARCH LINE AND 860 FEET FROM				You aka mus	,
71 . 4		LINE AND	FEET FROM	minimi	777
THE West LINE, SECT	TION 24 TOWNSHIP	17-8 BANGE 3	4-E		
mmmmm					////
	15. Elevation (Show	whether DF, RT, GR, etc.)		12. County	<i>HH</i>
16.		20 GR.		Lea IIII	
Check	Appropriate Box To Indi	ate Nature of Notic	e, Report or Oth	er Data	-777
NOTICE OF I	INTENTION TO:		SUBSEQUENT	REPORT OF:	
PERFORM REMEDIAL WORK					
TEMPORARILY ABANDON	PLUG AND ABAND	REMEDIAL WORK	$\square$	ALTERING CASING	
PULL OR ALTER CASING		COMMENCE DRILLI	NG OPNS.	PLUG AND ABANDONMEN	Ħ,
The same of the same	CHANGE PLANS	CASING TEST AND	CEMENT JOB		·
OTHER		OTHER			
<ol> <li>Describe Proposed or Completed O work) SEE RULE 1103.</li> </ol>	perations (Clearly state all pertin	ent details, and give perti	nent dates, including (	estimated date of starting any pro-	
				er sy stationag unty proj	20364
Λ ,	. 1	4	+	and also	
Isolate Up	ber Yenn. zone	and low	vect to	tipper and	
	per Penn. zone a per attock	S. J. Jan.	Summe	4.,	
Braduces a	a per allock	ed Wrilling	, 0000	3	
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			. 7.		
Λ		1. the	ac. Upper	, jenn.	
Il Sema	ve allowable	rum			
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11.	enion mand	he in th	he north	1 occurs	
This such	Tuck now	1/ (	. \ >		
This t as it	uell # 204, Th	ith, Vac. (a	ers) Tuld		
unic .					
	will # 204, n				
	·				
8. I hereby certify that the information	above is true and complete to the	best of my knowledge and	belief.		
8. I hereby certify that the information	above is true and complete to the	best of my knowledge and	belief.		
8. I hereby certify that the information  Christine O	above is true and complete to the	best of my knowledge and	belief.		<del></del>
IGNED Christine O	above is true and complete to the	best of my knowledge and	belief. Olerk	DATE 12-27- 72)	
IGNED Christine O	above is true and complete to the	best of my knowledge and	belief. Olerk	DATE 12-27- 72	
8. I hereby certify that the information  IGNED Christiene O. I	above is true and complete to the	best of my knowledge and	belief. Olerk		

FULLERVED

OLD COMPERVATION COMM.