DISTRIBUTION	·	Form C-103
DISTRIBUTION	to the second se	Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State X Fee.
OPERATOR		5. State Oil & Gas Lease No.
		OG 1049
CLINDOV	ANOTICES AND DEDODES ON WELLS	
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 GAS WELL WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Elk Oil Company		State KA
3. Address of Operator		9. Well No.
Box 310, Roswel	1 New Mexico	2
4. Location of Well	1, New Mexico	10. Field and Pool, or Wildcat
	60 FEET FROM THE SOUTH LINE AND 1980 FEET FO	Wildcat
UNIT LETTER	FEET FROM THE OCCUPANT LINE AND THE FEET FR	THE THE THE THE MOST
THE East LINE, SECTION	15 TOWNSHIP 178 RANGE 36E	PM. (
mmmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3841 GL	Lea
Check A	ppropriate Box To Indicate Nature of Notice, Report or	
NOTICE OF INT	FENTION TO: SUBSEQUE	ENT REPORT OF:
		<u></u>
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CABING
TEMPORARILY ABANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CABING TEST AND CEMENT JOS X	
	OTHER	
OTHER		
		line and and day of complete any proposed
17. Describe Proposed or Completed Ope work) SEE RULE'1 103.	rations (Clearly state all pertinent details, and give pertinent dates, include	ting estimated date of starting day proposed
•		
A 11" hole w	as drilled to 4500. On 8-20-67 new 8	5/8 24# and 32#
casing was s	et at 4500 and cemented with 200 Hall	iburton Light Weight
+ 100 sx neat. On 8-20-67 after 18 hours WOC the pipe was tested with		
1000 psi for	30 minutes without bleed off.	
2000 ,		
	•	
·		
18. I hereby certify that the information	shove is true and complete to the best of my knowledge and belief.	
18. I hereby certify that the information	above is true and complete to the best of my knowledge and belief.	·
18. I hereby certify that the information a	above is true and complete to the best of my knowledge and belief.	DATE 9-12-67

TONOTTIONS OF APPROVAL, IF ANYI