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# NEW MEXICO OIL CONSERVATION COMMISSION

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>OG-1635</b>

## 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 <b>MONSANTO COMPANY</b>	8. Farm or Lease Name <b>DON STATE</b>
3. Address of Operator <b>101 N. Marienfeld, Midland, Texas 79701</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>C</b> <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>16</b> TOWNSHIP <b>19S</b> RANGE <b>34E</b> N:4PM.	10. Field and Pool, or Wildcat <b>Undesignated</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>RKB 3809'</b>	12. County <b>Lea</b>

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 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.

**1-12-68: Drilled to T.D. 10,260' and ran 321 joints of 4½" 11.6# N-80 LT&C casing, set 10,251' at 10,259' and cemented w/200 sx Incor 2% gel, 11# salt per sack. Plug Down 1:45 p.m.**

**WOC total 18 hours and tested w/1000# for 30 minutes with no leak-off.**

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

SIGNED **A. W. Wood** TITLE **Dist. Prod. Supt.** DATE **1-16-68**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: