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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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"/>	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator PENNZOIL COMPANY	5. State Oil & Gas Lease No. OG 2001
3. Address of Operator P. O. Drawer 1828 - Midland, Texas 79701	7. Unit Agreement Name ---
4. Location of Well UNIT LETTER I , 1830 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 11 TOWNSHIP 19-S RANGE 34-E NMPM.	8. Farm or Lease Name State UPC "11"
	9. Well No. 1
	10. Field and Pool or Well Midland
	12. County Lea
15. Elevation (Show whether DF, RT, GR, etc.) 3971 RKB 3960 GR	

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

3-22-68: Drilled to TD of 10,500' - Ran logs - Ran 4-1/2", 11.6#, J-55 and N-80 casing to 10,500' and cemented with 680 sx. Class "C" cement containing 2% gel, 0.8% CFR-2, and 11# salt per sx. - Plug down at 11:00 AM 3-22-68. Top cement by temp. survey @ 7400'.

3-28-68: Tested casing to 3000# for 30 mins. - Tested O.K.

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

SIGNED Charles D. Brown TITLE Manager of Production DATE April 3, 1968

APPROVED BY Joe A. Stoney TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: