

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

NEW MEXICO OIL CONSERVATION COMMISSION

Orig & cc: OCC, Hobbs, NM
cc: State Land Office, Santa Fe, N.M.
cc: Union Oil Co. 300 Security Nat'l
Bank Bldg, Roswell, N.M.
cc: Regional Office, cc: file

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	K 5459

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 SINCLAIR OIL & GAS COMPANY	8. Farm or Lease Name State 974
3. Address of Operator P. O. Box 1920, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 18S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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 ☐

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.

7-29-68 Spudded 17-1/2" hole 2:00 A.M. 7-29-68, drilled surface, red bed, salt and anhydrite to 707'. Ran 13-3/8" OD 48# H-40 casing set @ 707' and cemented w/625 sacks, (425 sacks Class "C" 4% gel. 2% Cal. Chl. Slurry Wt. 13.1# plus 200 sacks Incor Class "C" plus 1/4# Flocele per. sk. 2% Cal. Chl. Slurry Wt. 14.5#). Cement Circulated to surface. WOC 24 hrs.

7-30-68 Pressure tested casing to 800# 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 [Signature] TITLE Superintendent DATE July 31, 1968

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____