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LAND OFFICE	
OPERATOR	

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.	
L 200	
7. Unit Agreement Name	
8. Farm or Lease Name	
STATE DE	
9. Well No.	
6	
10. Field and Pool, or Wildcat	
UNDESIGNATED	
12. County	
LEA	

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"/>
2. Name of Operator
AZTEC OIL AND GAS COMPANY
3. Address of Operator
P. O. BOX 837 HOBBS, NEW MEXICO 88240
4. Location of Well
UNIT LETTER 0, 990 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 24, TOWNSHIP 17S, RANGE 36E, NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3801 Gr.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

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

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
Surface ☐

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.

Drilled 12 1/4" hole to 332'. Ran 10 joints 8 5/8" J-55, 24# casing, set at 332'. Cemented with 215 sx encor 2% CaCl and 1/4# cellu-flakes per sack. Plug down 8:00 P.M., 12-26-69, cement circulated. W O C 24 hours. Pressured up on casing to 1000# for 30 minutes. Held Okay.

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

DAVID A. DONALDSON

SIGNED

TITLE District Geologist

DATE January 12, 1970

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: