NO. OF COPIES RECEIVED					
DISTRIBUTION				Form C-103 Supersedes Old	
ANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION		C-102 and C	C-102 and C-103	
ILE			Effective 1-	1-65	
s.g.s.			5a. Indicate Typ	pe of Lease	
AND OFFICE			State 🔀	Fee	
PERATOR			5. State Oil & G	ias Lease No.	
			B-10	140	
OO NOT USE THIS FORM FOR USE "APPLIE	DRY NOTICES AND REPORTS ON PROPOSALS TO DRILL OR TO DEEPEN OR PLUG CATION FOR PERMIT - " (FORM C-101) FOR SU	WELLS BACK TO A DIFFERENT RESERVOIR. TH PROPOSALS.)			
WELL GAS WELL	OTHER-		7. Unit Agreeme	nt Name	
Name of Operator Mobile	oil cooperation		8. Farm or Leas	e Name	
Address of Operator				9. Well No.	
Location of Well	33, Midland, I	exas 79701	á	2	
UNIT LETTER	1840 FEET FROM THE SOUTH	σ_{α}	10. Field and Po	ool, or Wildcat	
THE West LINE SEC	TION				
	15. Elevation (Show whether	,	MPM.		
		28 Gr	12. County	MIIIIII	
Check	Appropriate Box To Indicate N	ature of Notice Person	<u> </u>	<u> </u>	
NOTICE OF	INTENTION TO:	SUBSEQU	ENT REPORT OF:		
FORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK			
APORARILY ABANDON		COMMENCE DRILLING OPHS.		ING CASING	
L OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	PLUG A	AND ABANDONMENT	
		OTHER			
OTHER					
Describe Proposed or Completed	Operations (Clearly state all pertinent deta	ils and give pertinent desertion	7.		
BOTH SEE ROLE 1103.	,	ser, and give pertinent dates, inclu	aing estimated date of s	tarting any proposed	
.					
	"KK" #2		•		
3/2 (4)	3045 WOC on 8-5/8 csc	, circ hole la hr	s, pull bit	, RU &	
Lun	/3 Jts 8-5/8 OD 24 &	28# ST&C csg. How	rco cm $+ wi/ 1$	ንሰለው መነъ፣	
π/ .	/ · of parc/x forfowed a	// ZUUY ("Jace (" ta/	' 6 7# ~~1+/~	מיתר ייי	
2.50	0 P • m • 3/1//2, CMt Cli	C. NOCZULANC TO	Sted 8% &	2 sq For	
30M	ist 1000th, Tested	ox		,,,,,	
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	•				
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nereby certify that the information	abole is two				
1 1 A	above is true and complete to the best of	my knowledge and belief.			
- // Mar/)a	Auch TITLE AU	Thorisad Agon	T 2.	1-71.	
	Orig. Signal to	9 117011	2 DATE 3-6	2 / 1	
/ED 8Y	Joe D. Ramey TITLE		MAI	R 9 1972	
ITIONS OF APPROVAL, IF ANY			DATE		

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