

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

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 - 1" (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 type="checkbox"/> For <input checked="" type="checkbox"/>
2. Name of Operator Sohio Petroleum Company	5. State Oil & Gas Lease No. --
3. Address of Operator P. O. Box 4587 Houston, TX 77210	7. Unit Agreement Name --
4. Location of Well UNIT LETTER <u>M</u> <u>520</u> FEET FROM THE <u>West</u> LINE AND <u>660</u> FEET FROM THE <u>South</u> LINE, SECTION <u>11</u> TOWNSHIP <u>17S</u> RANGE <u>37E</u> N.M.P.M.	8. Farm or Lease Name Shipp "11"
	9. Well No. 1
	10. Field and Pool, or Wildcat Humble City-Strawn
15. Elevation (Show whether DF, RT, GR, etc.) 3745, 4 GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>SPUD</u> <input checked="" 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.

Well spudding occurred 2/17/88 at 13:00 hours. Delta Rig 61 is on location.

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

SIGNED T. C. Rooney T. C. Rooney TITLE Sr. Permit Specialist DATE 2/22/88

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

FEB 29 1988

APPROVED BY _____ TITLE _____ DATE _____