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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 type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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 Sur. Oil Company	8. Farm or Lease Name W. B. Maveety
3. Address of Operator P. O. Box 2792, Odessa, Texas 79760	9. Well No. 2
4. Location of Well UNIT LETTER 0 , 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 35 TOWNSHIP 19 S RANGE 36 E NMPM.	10. Field and Pool, or Wildcat Monument Monument
15. Elevation (Show whether DF, RT, GR, etc.) 3598.2' Gr.	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Acidize and run pump and unit

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.

Pulled tubing and packer. 1-27-70 reran tubing seated at 3918'. Swabbed. Dowell acidized OH 3776-3936 w/500 gals. 1% HCl acid down 2 7/8" tubing w/btm @ 3918, flushed w/24 bbls. water. Swabbed. Ran rods and pump - set pumping unit. On 24 hour potential ending 10 a.m. 2-4-70 pumped 35 BO, 21 BW - GOR 2255/1.

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

SIGNED John M. Sweeney	TITLE Ass't Dist. Superintendent	DATE 2-9-70
APPROVED BY [Signature]	TITLE SUPERVISOR DISTRICT	DATE 2-11-1970
CONDITIONS OF APPROVAL, IF ANY:		