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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

JUL 19 10 58 AM '67

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.	
B-11297-2	
7. Unit Agreement Name	
8. Farm or Lease Name	
State E-33	
9. Well No.	
3	
10. Field and Pool, or Wildcat	
Eumont	
12. County	
Lea	

SUNDY 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 & Gas Co.
3. Address of Operator
P. O. Box 837, Hobbs, New Mexico
4. Location of Well
UNIT LETTER <u>F</u> . <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>33</u> TOWNSHIP <u>20-S</u> RANGE <u>36-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3607 KB

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 ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☒

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

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.

This well is temporarily abandoned awaiting waterflood development.

REVISION MUST BE FILED
WITHIN 6 MONTHS ON FORM C-103
AS TO THE WELL STATUS AND YOUR
FUTURE PLANS FOR THIS WELL

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

original signed by

SIGNED LESTER L. DUKE

TITLE District Superintendent

DATE July 18, 1967

Lester L. Duke

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: