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NEW MEXICO OIL CONSERVATION COMMISSION

Nov 12 11 28 AM '65

Form C-101  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

|  |
|--|
| 4. Indicate Type of Lease  |
| State <input type="checkbox"/> Fed. <input checked="" type="checkbox"/> Fee <input 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   | 6. Form or Lease Name          |
| 3. Address of Operator  | 8. Well No.<br><b>18</b>       |
| 4. Location of Well<br>UNIT <b>G</b> <b>1837</b> FEET FROM THE <b>North</b> LINE AND <b>1650</b> FEET FROM<br><b>East</b> LINE, SECTION <b>4</b> TOWNSHIP <b>19-S</b> RANGE <b>37-E</b> NMPM. | 10. Field and Pool, or Wildcat |
| 15. Elevation (Show whether DF, RT, GR, etc.)   | 11. County                     |

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"/>     |
| PILL 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 type="checkbox"/>                      |   |

12. Indicate Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

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

Original Signed By

SIGNED C. L. WADE TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: