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NEW MEXICO OIL CONSERVATION COMMISSION
3-11-67
1-File

Form C-103
Supersedes Old
Form C-103
Effective 1-1-65
HOBBS OFFICE O. G. C.
JUN 16 3 40 PM '67

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.)		State <input type="checkbox"/> Fee <input type="checkbox"/> 5. State Oil & Gas Lease No.
1. <input checked="" type="checkbox"/> WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Midwater Oil Company		8. Name of Lease East Desert Unit
3. Address of Operator P. O. Box 249, Hobbs, New Mexico 88240		9. Well No. 13
4. Location of Well UNIT LETTER A , 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 4 , TOWNSHIP 19S , RANGE 37E , NMPM.		10. Kind of Well Producing or Wildcat
15. Elevation (Show whether DF, RT, GR, etc.)		11. County Lin

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> X <input 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 shut in pending development of water flood.

18. 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. VADE	Area Superintendent TITLE _____	DATE 6-16-67
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		