Constitution  NEW MEXICO OIL CONSERVATION COMMISSION  NEW MEXICO OIL CONSERVATION  NEW MEXICO OIL CONSERVATION COMMISSION  NEW MEXICO OIL CONSERVATION  NEW MEXICO OIL CONSERVATION COMMISSION  NEW MEXICO OIL	NO. OF COPIES RECEIVED		Hun.	Form C-103
HEY MERICO IL CONSERVATION COMMISSION    March	DISTRIBUTION			ि ः ([FSnpprsedes Old C-105-abil C-102
USENCE SUPPORT SON WELLS SONDRY NOTICES AND REPORTS ON WELLS SONDRY NOTICES AND REPORTS ON WELLS SONDRY NOTICES AND REPORTS ON WELLS THE STATE AND SONDRY NOTICES AND REPORTS ON WELLS THE STATE AND SONDRY NOTICES AND REPORTS ON WELLS THE STATE AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS THE STATE AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SONDRY NOTICES AND REPORTS ON WELLS TO SON AND SON	SANTA FE	NEW MEXICO OIL CONSE	RVATION COMMISSION 1111 2	
State OF FICE OPERATOR  SUNDRY NOTICES AND REPORTS ON WELLS STATE OF SUNDRY NOTICES AND REPORTS OF SUNDRY NOTICES OF SUNDRY NOTIC	FILE	3-101100	Out Z	10 30 84 00
Service Control of Con	U.S.G.S.	4-12-6		
SUNDRY NOTICES AND REPORTS ON WELLS  ON NOTICE TO FIRST SERVICE TO A DESCRIPTION OF SUBSEQUENT REPORT OF SUBSEQUENT REPORT OF SERVICE TO A DESCRIPTION OF SUBSEQUENT REPORT OF SUBSEQUENT REPOR	LAND OFFICE			
There is the state of the state	OPERATOR			5, State Oil & Gas Lease No.
There is the state of the state	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.			
2. Notes of Countries 3. Additions of Countries 5. On the 249, Hebries, Near Meason 888200 4. Location of Well 4. Location of Well 5. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  PERFORM ARMSIN MORE TENTRAL MORE	OIL GAS		PROPOSALS.)	7. Unit Agreement Name
9. Well 30.  4. Location of Wolf.  ONT LETTER D  660 FEET FROM THE MORTH  10. Field and Pool, or Wilden House of Morth  10. Field and Pool, or Wilden House of Morth  10. Field and Pool, or Wilden House of Morth  11. Elevation (Show whather DF, RT. GR, etc.)  12. Courter  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  FLUG AND ARADON FOR COMMISSIONED OF PLUG AND ARADON FOLIA WORK  COMMISSIONED AND ARADON FOLIA WORK  TENTORMATIVE ANALOGO  OTHER COMMISSIONED BY ADDRESS OF STATE AND GRAPT SHOULD be performed.  15. Liveration (Show whather DF, RT. GR, etc.)  16. I hereby certify that the information above is true and complete to the hear of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G, WEST  17. Describe by HAROLD G, WEST	2. Name of Cherator			
Studies are being made to determine if remedial work should be performed.    10. Field and Pool, or Widnest Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:    12. Courteen Notice, Report or Other Data Subsequent Report or Other Data Subsequent Report or Subsequent Report or Plug and Associated Pool, or Affective Report or Other Data Subsequent Report or Plug and Associated Pool, or Affective Report or Other Data Subsequent Report or Plug and Associated Pool, or Affective Report or Other Data Subsequent Rep	3. Address of Operator	249, Mobbe, New Mexico &	Belio	
TOWNS TO SEE NUL E 105.  Check Appropriate Box To Indicate Nature of Notice, Report of Other Data SUBSEQUENT REPORT OF:  REMEDIAL WORK TOWNS ENTER AND SHE WILL E 105.  Check Appropriate Box To Indicate Nature of Notice, Report of Other Data SUBSEQUENT REPORT OF:  REMEDIAL WORK TOWNS ENTER AND SHE WILL E 105.  REMEDIAL WORK TOWNS				10. Field and Pool, or Wildcat
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  REMEDIAL WORK  TEMPORARILY ASANCH PULL OR ALTERIAGE CARING  OTHER  17. Describe Proposed of Completed Operations (Clearly state all pertinent details, and gine pertinent dates, including estimated date of starting any proposed.  Studies are being made to determine if remedial work should be performed.  ORIGINAL SIGNED BY  HAVE DATE  ORIGINAL SIGNED BY  17. Describe Proposed of Complete Complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY  17. Describe Proposed of Complete Complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY  17. Describe Proposed of Complete Complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY  17. Describe Proposed of Complete Complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY  17. Describe Proposed of Complete Complete Complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY  17. Describe Proposed of Complete	UNIT LETTER	660 FEET FROM THE North	_ LINE AND 660 FEET FRO	Menument
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM SEMEDIAL WORK TEMPORATILY ABANDON PAUL OF ALTER CASING  OTHER  OTHER  WIO GAIL TO SEE RULE 1103.  Studies are being made to determine if remedial work should be performed.  Studies are being made to determine if remedial work should be performed.  18. I hereby certify that the information above is true and complete to the beat of my knowledge and belief.  ORIGINAL SIGNED BY HAROLO G. VEST  TITLE  DATE  DATE  PERFORM SEMEDIAL WORK COMMENCE DRILLING OPINS.  ALTERING CASING FLUG AND ABANDON FLUG SUBSEQUENT REPORT OF:  SUBSEQUENT REPO	THE West LINE, SECTION	17 TOWNSHIP 198	RANGE 37E NMPN	
SUBSEQUENT REPORT OF:  PEATORM REMEDIAL WORK  TEMPRAREILY ASANDON  PULL OR ALTER CASING  OTHER  OTHER  OTHER  STUDIES PROPERED OF Completed Operations (Clearly state all partinent details, and give pertinent dates, including estimated date of starting any proposed work).  Studies are being made to determine if remedial work should be performed.  Studies are being made to determine if remedial work should be performed.		15, Elevation (Show whether D	F, RT, GR, etc.)	12. Cour <b>t</b>
SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK  TEMPSARLY ABARDON  PULS AND ABANDON  OTHER  OTHER  OTHER  OTHER  OTHER  STUDIES OF COMPLETE CASING  STUDIES OF COMPLETE OF COMPL	16. Check A	Appropriate Boy To Indicate No	ture of Notice Description	
TEMPORABILY ASABOR PULL OR ALTER CASING OTHER  17. Describe Proposed of Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1105.  Studies are being made to determine if remedial work should be performed.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. VEST TITLE  DATE  OPROVED BY  TITLE  DATE				
TEMPORANTLY ARABON PULL OR ALTER CASING OTHER  OTHE	PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
OTHER STUDIES OF ALTER CASING CHANGE PLANS OTHER STORE OTHER WITO Well TO THER WORK STORE OTHER WORK STORE O	TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	·
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.  Studies are being made to determine if remedial work should be performed.  Studies are being made to determine if remedial work should be performed.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. VEST TITLE DATE	PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOE	
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 163.  Studies are being made to determine if remedial work should be performed.  18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. MEST TITLE DATE			OTHER	NTO Vol1
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. VEST TITLE DATE  DATE	17. Describe Proposed or Completed Opework) SEE RULE 1103.	erations (Clearly state all pertinent detail	s, and give pertinent dates, includin	g estimated date of starting any proposed
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. VEST TITLE DATE  DATE				
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.  ORIGINAL SIGNED BY HAROLD G. VEST TITLE DATE  DATE	Studies are bein	Made to determine if w	medial work should be	nowformed
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE			warrar warr should be	barronmed.
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  PPROVED BY  TITLE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  PPROVED BY  TITLE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  PPROVED BY  TITLE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE		•		
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE				
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE		_		
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  DATE		*		
ORIGINAL SIGNED BY HAROLD G. VEST  TITLE  DATE  PPROVED BY  TITLE  DATE	8. I hereby certify that the information s	about the same of		
APPROVED BY TITLE DATE			ny transitadan and totta	
APPROVED BY TITLE DATE	HAROLD G VECT	above is true and complete to the best of i	ny knowledge and belief.	
DATE		above is true and complete to the best of i		6-20-67
DATE	FIGNED 4.7251	· ·		•
DATE	IGNED 4.7EST	· ·		•
		; TITLE	Aron Eupt.	DATE