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| OPERATOR               |  |

NEW MEXICO OIL CONSERVATION COMMISSION  
1-File

Form C-103  
Supersedes Old  
C-103  
Effective 1-1-65  
HOBBS OFFICE  
JUN 16 3 52 PM '67

|  |
|--|
| 4. Indicate Type of Lease<br>State <input type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |
| 7. Unit Agreement Name   |
| 8. Name of Operator  |
| 9. Well No.  |
| 10. Name of Operator   |
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| 99. Name of Operator   |
| 100. Name of Operator  |

### 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER   | 7. Unit Agreement Name |
| 2. Name of Operator  | 8. Name of Operator    |
| 3. Address of Operator   | 9. Well No.            |
| 4. Location of Well<br>UNIT LETTER <b>E</b> , <b>1980</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM<br>THE <b>West</b> LINE, SECTION <b>22</b> TOWNSHIP <b>19S</b> RANGE <b>37E</b> NMPM. | 10. Name of Operator   |
| 15. Elevation (Show whether DF, RT, GR, etc.)  | 11. Name of Operator   |

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <input checked="" 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 - load

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

Original Signed By

G. L. WADE

Area Superintendent

6-16-67

SIGNED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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

CONDITIONS OF APPROVAL, IF ANY: