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DISTRIBUTION			Form C-103 Supersedes Old
SANTA FE	AMARA APPIAR A A		
FILE	, '	SHOER VALL FOR COMMISSION	Effective 1-1-65
U.S.G.S.	3-100CC	No. 18 3 at 78 18	5a. Indicate Type of Lease
LAND OFFICE	1-File		State Fee
OPERATOR			5. State Oil & Gas Lease No.
		<u> </u>	
(DO NOT USE THIS FORM FOR USE "APPL			
OIL GAS WELL 2. Name of Operator	OTHER-		7. Unit Agreement Name
Tidexe 3. Address of Operator	8. Farm or Lease Name Bast Sumont Unit		
P. O.	9. Well No.		
4. Location of Well UNIT LETTER	10. Field and Pool, or Wildcat Rumont Queen		
THE West LINE, SI	ection 27 township 19	8 RANGE NM	
	15. Elevation (Show wheth		12. County
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER 17. Describe Proposed or Completed work) SEE RULE 1103.		REMEDIAL WORK COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JQB OTHER details, and give pertinent dates, includ	ALTERING CASING PLUG AND ABANDONMENT ing estimated date of starting any proposed
8. I hereby certify that the informat Original S G. L.	ion above is true and complete to the besingned By	t of my knowledge and belief. Area Supt.	DATE 11-18-66

APPROVED BY ___

CONDITIONS OF APPROVAL, IF ANY: