

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

HOBBS OFFICE D. C. C.  
NEW MEXICO OIL CONSERVATION COMMISSION  
JUN 16 3 52 PM '67

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Form of Lease Name	
9. Well No.	
10. Field and Pool or Wildcat	
11. County	

### 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 Hedvat Oil Company	8. Form of Lease Name
3. Address of Operator P. O. Box 249, Hobbs, New Mexico 88240	9. Well No.
4. Location of Well UNIT LETTER <b>B</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>27</b> TOWNSHIP <b>19S</b> RANGE <b>37E</b> NMPM.	10. Field and Pool or Wildcat

15. Elevation (Show whether DF, RT, GR, etc.)	11. County
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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 flood.

THE COMMISSION HAS REVIEWED THE ABOVE INFORMATION AND HAS  
EVERYTHING IN ACCORDANCE WITH THE RULES AND REGULATIONS  
AS TO THE WELL STATES AND HAS  
FUTURE PLANS FOR THIS WELL

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

Original Signed By		DATE	
SIGNED <b>C. L. WADE</b>	TITLE	DATE	
APPROVED BY		DATE	
CONDITIONS OF APPROVAL, IF ANY:			

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