NEW MEXICO OIL CONSERVATION CONTROL (1-4) Support of the Control)F COPIES RECEIVED		unage (FFICE O.C.C.	Form C-103
ELECTIVE - STATE STATE OF THE PROPERTY OF STATE OF THE PROPERTY OF STATE OF	ISTRIBUTION		прооз		
SUBSTITUTE STATES SUBSTITUTE OF THE PROPERTY O	rafe	NEW	MEXICO OIL CONSERVAT	IAN COMPASSO	
Son DOPFICE ERATOR SUNDRY NOTICES AND REPORTS ON WELLS (20 NOT USE THIS JOSEPH AND STATES IN THE	2		JUN 10	3 34 111 UI	
Solve Of Scale Leave No. Solve Of Scale Leave No.	.G.S.				
SUNDRY NOTICES AND REPORTS ON WELLS OR NOTICE THE PROPERTY OF SECURITY TO SEC	ND OFFICE				
Second S	ERATOR				5. State Oil & Gas Lease No.
OFFICE OF INTENTION TO: Conception of West Sept of the Concept of Conception of West Sept of the Concept of Concep					***************************************
STATE OF STA	SUN (DO NOT USE THIS FORM FOR USE "APPL	IDRY NOTICES AND PROPOSALS TO DRILL OF ICATION FOR PERMIT -"	ID REPORTS ON WELL	S DIFFERENT RESERVOIR.	
NAME OF COPERIOR SECRETARY SECTION 15 CONTRACTOR SECRETARY SECTION 15 CONTRACTOR SECTION	. A GAS D				7. Unit Agreement Nume
Address of Opensor. Address of Opensor. 1900	WELL WELL				8 House Or betrade Bands 1
Liceotion of Well 1. Locotion of Nature of Notice, Report of Other Data 2. Locotion of Nature of Notice, Report of Other Data 2. Locotion of Nature of Notice, Report of Other Data 2. Locotion of Nature of Notice, Report of Other Data 2. Locotion of Nature of Notice, Report of	Name of Operator	OVE COMMISSION			Of Middle or The Control of the Cont
Linearing of Well Jeff 1980 See From the Rorth Line and 1980 The West Line, section 35 Township 198 AAGE Township 198 Township 19			The state		g Well No.
Describe Proposed or Completed Operations (Clearly state all perminent details, and give pertinent dates, including estimated date of starting any propose work) see rule 163. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of: Check Appropriate Box To Indicate Nature of Notice, Report or Other Data Subsequent Report of: Subsequent Report of: Commercial work Commercial	. Address of Operator	SHOW BURNEY IN	as (states and otherway)		
THE WORK LINE, SECTION 35 TOWNSHIP 15. Elevation (Show whether DF, RT, GR, etc.) 13. Great AND ABARDON Subsequent of Notice, Report of Other Data Subsequent Report of: **REMORARILY ABARDON CHANGE PLANS CHAN					10 - State left introd Plants bir Wildcat
THE WORK LINE, SECTION 35 TOWNSHIP 198 AARGE STR. NAPAL S. Elevation (Show whether DF, RT, GR, etc.) Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: THE MEMORARILY ARRIVED CHARGE PLANS OTHER OTHER OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE MULE 1703. MAIN AND SECRET OF THE CAMBISSION AND SECRET STREET AND CHARGE PLANS NATE OF THE CAMBISSION AND SECRET STREET AND CHARGE PLANS OTHER STREET	· •	1980		1980 FEET	**
THE WORK SECTION STANSON SANGE SANGE SANGE SANGE SANGE SANGE SECTION STANSON SUBSEQUENT REPORT OF: Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK SUBSEQUENT REPORT OF: REMEDIAL WORK SUBSEQUENT RE	VIII. 12.11.				
15. Elevation (Show whether DF, RT, GR, etc.) 12. Department of Notice, Report or Other Data NOTICE OF INTENTION TO: PLUS AND ABANDON	THE West	ECTION	_ TOWNSHIP F		имрм. (()))))))))))))))))
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK THE PORT OF: REMEDIAL WORK THE PORT OF: REMEDIAL WORK THE COMMENCE DRILLING OFFIS. CASING TEST AND CEMENT JOB OTHER OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. WHE CAMMISSION WHE CAMMISSION APPROVED BY SIGNED O'TIGINAL Signed By TITLE DATE DATE	LINE, S				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDONMENT TEMPORARILY ABANDON PLUS AND ABANDONMENT CASING TEXT AND CEMENT JOB PLUS AND ABANDONMENT TOTHER OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By SIGNED Q. L. WADB TITLE APPROVED BY DATE DATE DATE APPROVED BY DATE APPROVED BY DATE APPROVED BY DATE DATE DATE APPROVED BY DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE DATE		15, Ele	vation (Show whether DF, RT	, GR, etc.)	12.4.66 unty
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDONMENT COMMERCE DILLING OPPS. CASING TEST AND CEMENT JOB OTHER OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 1714.6 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 1714.6 APPROVED BY APPROVE					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDON PLUS AND ABANDONMENT COMMERCE DILLING OPPS. CASING TEST AND CEMENT JOB OTHER OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 1714.6 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 1714.6 APPROVED BY APPROVE	.6. Che	ck Appropriate Bo	ox To Indicate Nature	of Notice, Report of	r Other Data
TEMPORATIC ABANDON PULL OR ALTER CASING OTHER OTH				SUBSEQU	JENT REPORT OF:
THE COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS CASING TEST AND CEMENT JOB OTHER CHANGE PLANS CASING TEST AND CEMENT JOB OTHER CHANGE PLANS CASING TEST AND CEMENT JOB OTHER CHANGE PLANS COMMENCE DESIGNATION OF SER PLUG AND ABANDONMENT CHANGE PLANS CASING TEST AND CEMENT JOB OTHER CHANGE PLANS CASING TEST AND CE		•	LUC AND ABANDON DEME	DIAL WARK	ALTERING CASING
OTHER OT	\Box	, , , , , , , , , , , , , , , , , , ,			
OTHER 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	7	_			1
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1703. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	PULL OR ALTER CASING	C.			,
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By Title OATE DATE DATE				AEK	
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Original Signed By TITLE DATE DATE DATE					
Wall state sending framelogosests of water flore Wall state sending framelogosests of water flore Wall state sending framelogosests of water flore WALL SIGNAL STATE CAMMISSION ALL NO FOR the LEND FOR the Original Signed By Title DATE DATE	17. Describe Proposed or Complete	ed Operations (Clearly	state all pertinent details, an	d give pertinent dates, inc	luding 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 SIGNED C. L. WADE OATE DATE	work) SEE RULE 1103.				
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. WADE OATE DATE					
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. WADE OATE DATE					
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. WADE OATE DATE					
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. WADE OATE DATE	Harry Miles	oth the periodicing	demisiopeess of res	the flore	
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. WADE TITLE DATE APPROVED BY DATE					
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. WADE TITLE DATE APPROVED BY DATE					
16. 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. WADE TITLE DATE APPROVED BY DATE					
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. WADE TITLE DATE APPROVED BY DATE					
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. WADE TITLE DATE APPROVED BY DATE					
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. WADE TITLE DATE APPROVED BY DATE					
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. WADE TITLE DATE APPROVED BY DATE				MANISSION MO	
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. WADE TITLE DATE APPROVED BY DATE			THE SC	X X NTHE "	<u>.</u>
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. WADE TITLE DATE APPROVED BY DATE			문제 : 1	VEL 2	
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. WADE TITLE DATE APPROVED BY DATE				DIANS FOR	
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE			\$ F	. Nat	
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE					
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE					
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE					
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE					
Original Signed By SIGNED C. L. WADE TITLE DATE APPROVED BY DATE			Loomplate to the heat of my b	nowledge and helief.	
APPROVED BY DATE DATE					
APPROVED BY DATE					DATE
APPROVED BY TITLE	SIGNED U. L. WAD	-			
APPROVED BY TITLE		,			
PACINITY .	A B B B OVE D BY		TITLE		DATE
	ATTRIOVED BI	- ANIV.	- PAGINI		