

COPIES RECEIVED		
DISTRIBUTION		
DATE		
LE		
SIG.		
OFFICE		
ATOR		

NEW MEXICO OIL CONSERVATION COMMISSION
 Orig & 2cc: OCC, Hobbs
 cc: Regional Office
 cc: file

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

JAN 23 10 00 AM '67

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Bertha J. Barber
9. Well No. 9
10. Field and Pool, or Wildcat Monument Blinbry
12. County Lea

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Name of Operator Sinc lagn Oil & Gas Company 3. Address of Operator P. O. Box 1920, Hobbs, New Mexico 4. Location of Well UNIT LETTER A 330 FEET FROM THE North LINE AND 855 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 20S RANGE 37E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3558' GR	7. Unit Agreement Name
--	------------------------

16. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OUT ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Installation of Artificial Lifting Equipment
CHANGE PLANS <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

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.

1-4-67 Installed artificial lifting equipment (Pumping unit and electric motor).

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

SIGNED: [Signature] TITLE: Superintendent DATE: 1-17-67

APPROVED BY: [Signature] DATE: JAN 23 1967

ORIGINAL & THREE COPIES
 SIGNED BY: [Signature] TITLE: ENGINEER
 NO. 1