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HOBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION
Orig & 2cc: NMOCC
loc: File
APR 18 11 50 AM '69

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator GIFTY OIL COMPANY		8. Farm or Lease Name T. Anderson
3. Address of Operator P. O. BOX 249, HOBBS, NEW MEXICO		9. Well No. 2
4. Location of Well UNIT LETTER I 1980 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 8 TOWNSHIP 208 RANGE 37E NMPM.		10. Field and Pool, or Wildcat Enice (G-8A)
15. Elevation (Show whether DF, RT, GR, etc.) 3550' DF		12. County Lee

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

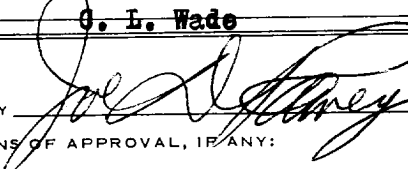
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	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"/> Fill cellar

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.

Installed risers to ground level on surface, intermediate and oil strings.
Attached permanent identification tags to each. Filled cellar with sand.
Job completed on 3-27-69.

NOTE: Cellar inspected before filling by Mr. Leslie Clements with the NMOCC
on March 25, 1969.

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	
SIGNED O. L. Wade		Area Superintendent		4-2-69	
APPROVED BY 		TITLE SERVICE SUPERVISOR		DATE	
CONDITIONS OF APPROVAL, IF ANY:					