

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE O. C. C.

MAY 16 8 34 AM '66

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

SUNDRY NOTICES AND REPORTS ON WELLS <small>(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.)</small>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. State Oil & Gas Lease No.
2. Name of Operator TRAINER CORPORATION		7. Unit Agreement Name
3. Address of Operator P. O. Box 1100, Hobbs, New Mexico		8. Farm or Lease Name Linam
4. Location of Well UNIT LETTER ' B , 335 FEET FROM THE North LINE AND 2310 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 20S RANGE 35E NMPM.		9. Well No. #2
15. Elevation (Show whether DF, RT, GR, etc.) 3682 GL		10. Field and Pool, or Wildcat Pearl Queen
12. County Lea		11. County Lea

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spudded well at 1:30 P. M. May 12, 1966. Ran 112' 8 5/8" casing and set at 100' with 75 sacks Incor plus 2% C. C. WOC 12 hours. Cement circulated. Pressure test casing 1000#. Held o. k.

See [unclear]

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

SIGNED C. W. Trainer

TITLE President

DATE May 13, 1966

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: