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NEW MEXICO OIL CONSERVATION COMMISSION

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Danson Exploration Corp.		8. Farm or Lease Name Jones
3. Address of Operator Box 953, Midland, Texas		9. Well No. 1
4. Location of Well UNIT LETTER <u>H</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>20-S</u> RANGE <u>30-E</u> NMPM.		10. Field and Pool, or Wildcat Undesignated House Blinebr.
15. Elevation (Show whether DF, RT, GR, etc.) 3593 GRF		12. County Lea

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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> completion in Blinebry formation

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.

Re-entered to old T. D. at 7531'. Ran 5 1/2", 15.5#, J-55 casing to T. D. Cemented w/450 sks. 2% gel Class "C" cement. Perforated Tubb-Drinkard 6694'-7232' w/38 holes. Acidized w/5000 gal. Fracture treated w/30,000 gal. brine 14 two stages. Swab test: @6650', Perofracted Blinebry with 19 holes @ 6070'-6246: Acidized w/2000 gallons. Fracture treated w/15,000 gallons gelled brine water and 15,000# sand. Presently testing.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>Liberion Jones</u>	TITLE <u>Agent</u>	DATE <u>2-13-69</u>
APPROVED BY <u>[Signature]</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		