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FE

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-101  
Effective 1-1-65

U.S.G.S.  
LAND OFFICE  
OPERATOR

5a. Indicate Type of Lease

State ☒Fee ☐

5. State Oil &amp; Gas Lease No.

B-158

## 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.

OIL  
WELL ☐GAS  
WELL ☐

OTHER-

Water Injection well

Jalmat

7. Unit Agreement Name

Field Yates Sand Unit

8. Farm or Lease Name

9. Well No.

133

10. Field and Pool, or Wildcat

Jalmat

UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1980 FEET FROMTHE West LINE, SECTION 13 TOWNSHIP 22-S RANGE 35-F NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3604' DF

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐REMEDIAL WORK ☐ALTERING CASING ☐TEMPORARILY ABANDON ☐COMMENCE DRILLING OPNS. ☐PLUG AND ABANDONMENT ☐PULL OR ALTER CASING ☐CHANGE PLANS ☐CASING TEST AND CEMENT JOBS ☐OTHER ☐OTHER Plug and abandon ☐

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.

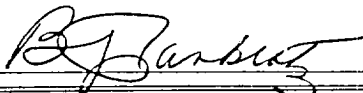
3395' TD.

Pull injection equipment. Set CI BP at 3650' and cap with 5 sack cement plug from 3650' to 3600'. Displace hole with water containing 25 sacks of gel per 100 barrels of water. Spot 15 sack cement plug from 2000' to 1850', across top of salt. Load hole with heavy mud. Spot cement plug from 50' to surface. Install dry hole marker and clean location.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNED


TITLE Area EngineerDATE May 6, 1974

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: