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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 checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <u>B-1534</u>	

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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator <u>Continental Oil Company</u>		8. Farm or Lease Name <u>STATE J-2</u>
3. Address of Operator <u>P. O. Box 460, Hobbs, New Mexico 88240</u>		9. Well No. <u>4</u>
4. Location of Well UNIT LETTER <u>A</u> , <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>2</u> TOWNSHIP <u>22-S</u> RANGE <u>36-E</u> NMPM.		10. Field and Pool, or Wildcat <u>Arrowhead Grayburg</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3563 BT</u>		12. County <u>LEA</u>

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 ☐
OTHER ☐

SUBSEQUENT REPORT OF:

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

Status of Well: SHUT-IN

Approximate date that temp. aban. commenced: 3-15-68

Reason for temp. aban.: UNKNOWN

Future plans for Well: Holding for secondary Recovery

Expired 11-1-76

Approximate date of future W.O. or plugging: 4th qtr 1976

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

SIGNED A. D. Illies TITLE Asst. Secy. Gen. DATE 10-31-75

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
NMOCC-4