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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 ☒ Fee ☐

5. State Oil & Gas Lease No.
B-1534

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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Continental Oil Company	8. Farm or Lease Name STATE J-2
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 12
4. Location of Well UNIT LETTER D 660 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 22S RANGE 36E NMPM.	10. Field and Pool, or Wildcat EUMONT GAS
15. Elevation (Show whether DF, RT, GR, etc.) 3570' KB	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 ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☒ **PLUG BACK**

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☒

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.

SET CMT. RETAINER AT 3400' & SQUEEZE EXISTING PERFS & LINER W/250 SX CLASS 'C' CMT. TAGGED CMT AT 3393'. DRILD. OUT CMT. & RETAINER TO 3665' PBTD. PERFD 3598', 3618', 27', 39' & 49' W/1-JSPF. TREATED W/900 GAL. ACID. FRACED W/6500 GAL. ACID & 10,000# 20/40 SAND. PERFD 3018', 48', 65' & 93', 3153', 3212', 3324', 49', 82' & 92' & 3418'. TREATED W/2150 GAL. ACID. FRACED W/17,000 GAL. ACID W/30,000# 20/40 SAND. RAN PROD. TBG & TESTED WELL 2-6-76: 2.3 MMCF/D ON 3/4" CHOKE, 24 HR. TEST, O-BOPD.

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

SIGNED Wm. A. Buttsfield TITLE ADMIN. SUPERVISOR DATE 4-2-76

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC (5) File