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NEW MEXICO OIL CONSERVATION COMMISSION

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

APR 23 8 45 AM 1969

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fed <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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator CLIFTON THOMAS		8. Farm or Lease Name DAY
3. Address of Operator P. O. BOX 1071, SAN ANGELO, TEXAS 76901		9. Well No. 2
4. Location of Well UNIT LETTER <u>M</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>856</u> FEET FROM THE <u>West</u> LINE, SECTION <u>6</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.		10. Field and Pool, or Wildcat JALMAT
15. Elevation (Show whether DF, RT, GR, etc.) KB 3610'		12. County LEA

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

During June or July we plan to plug back and perforate the Yates Sands that are present behind the casing above the present Seven Rivers perforations. A subsequent report of this remedial work will be filed prior to commencement.

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

SIGNED <u>Clifton Thomas</u>	TITLE <u>Owner-Operator</u>	DATE <u>4-23-69</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>Secretary</u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		