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NEW MEXICO OIL CONSERVATION COMMISSION

HOEBS OFFICE

JUN 27 10 32 AM '67

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

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No. <b>1</b></p>
<p>1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. Name of Operator <b>El Estero Oil Company</b></p> <p>3. Address of Operator <b>P. O. Box 249, Hobbs, New Mexico 88240</b></p> <p>4. Location of Well UNIT LETTER <b>C</b>, <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>6</b> TOWNSHIP <b>22S</b> RANGE <b>36E</b> NMPM.</p>	<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name <b>J. E. Day</b></p> <p>9. Well No. <b>1</b></p> <p>10. Field and Pool, or Wildcat <b>Jalnet</b></p>	
<p>15. Elevation (Show whether DF, RT, GR, etc.)</p>	<p>12. County <b>Dea</b></p>	

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>NIO Well</b>

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.

**Studies being made to determine if well can be recompleted in another zone.**

NO WORK THIS WELL

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

<p>ORIGINAL SIGNED BY <b>HAROLD G. VEST</b></p> <p>SIGNED _____</p>	<p><b>Area Supt.</b></p> <p>TITLE _____</p>	<p><b>6-20-67</b></p> <p>DATE _____</p>
<p>APPROVED BY _____</p> <p>CONDITIONS OF APPROVAL, IF ANY: _____</p>	<p>TITLE _____</p>	<p>DATE _____</p>