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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 12-85

JUN 23

5. Location of Lease State <b>TX</b> Fee <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name <b>State "A" A/c-2</b>
9. Well No. <b>6</b>
10. Field and Pool, or Wildcat <b>South Eunice</b>
11. County <b>Lea</b>

## 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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-
2. Name of Operator <b>TEXAS PACIFIC OIL COMPANY</b>
3. Address of Operator <b>P. O. Box 1069 - Hobbs, New Mexico</b>
4. Location of Well UNIT LETTER <b>B</b> , <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>7</b> TOWNSHIP <b>22-S</b> RANGE <b>36-E</b> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <b>3606' DF</b>

## 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 type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

### SUSSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" 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.

1. Rigged up. Drilled from 3882 - 3995' TD.
2. Swab to test fluid level.
3. Acidized under packer set @ 3852'.in OH 3852-3995', w/5000 gal. NE acid. Swab.
4. Shut in for study.

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

SIGNED Sheldon Ford TITLE Area Superintendent DATE 6-28-67

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: