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NEW MEXICO OIL CONSERVATION COMMISSION

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

Nov 15 1 30 PM '65

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center"><small>(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.)</small></p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No.</p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/></p> <p>2. Name of Operator <b>TEXAS PACIFIC OIL COMPANY</b></p> <p>3. Address of Operator <b>P. O. Box 1069; Hobbs, New Mexico</b></p> <p>4. Location of Well UNIT LETTER <b>K</b>, <b>1980</b> FEET FROM THE <b>south</b> LINE AND <b>2316</b> FEET FROM THE <b>west</b> LINE, SECTION <b>7</b> TOWNSHIP <b>22-S</b> RANGE <b>36-E</b> NMPM.</p>	<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name <b>State "A" A/c-2</b></p> <p>9. Well No. <b>21</b></p> <p>10. Field and Pool, or Wildcat <b>South Eunice</b></p>	
<p>15. Elevation (Show whether DF, RT, GR, etc.) <b>3603 G.L.</b></p>		<p>12. County <b>Lea</b></p>

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"/>

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 JOB <input type="checkbox"/>	OTHER <b>TEMPORARILY ABANDONED</b> <input checked="" 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.

**HELD FOR POSSIBLE REMEDIAL WORK AND SECONDARY RECOVERY.**

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

SIGNED Original signed by: Hollis W. Deats TITLE Area Engineer DATE 11-10-65

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

CONDITIONS OF APPROVAL, IF ANY: