NO. OF COPIES BECSTAFD		Form C-103
DISTRIBUTION		Supersedes Old
ANTAFE	NEW MEXICO OIL CONSERVATION CO	C-102 and C-103  MMISSION Effective 1-1-65
FILE		
J.S.G.S.		5a. Indicate Type of Lease
AND OFFICE		State Fee
PERATOR		5. State Qil & Gas Lease No.
		11111 26
CUNDOV	MOTICES AND DEPORTS ON WELLS	minimin de la company de la co
OUNDRY (DO NOT USE THIS FORM FOR PROPOSE	NOTICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFEREN FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	NT RESERVOIR.
OSE "APPEICATION	FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
OIL GAS WELL WELL		7. One Agreement Name
Name of Operator	OTHER-	8. Form or Lease Name
JESIAS GICI.	ic Die Combaru	
. Address of Operator	a VIII 11 16-42 16	9. Well No.
Location of Well	1, 11, 10,00 na 18 has	191701 1
$D I_{\alpha}$	40 North	10. Field and Pool, or Wildcat  S. Thomas in Rip. Overn
UNIT LETTER	FEET FROM THE FEET LINE AND	FEET FROM PLEEN
THE LINE, SECTION	8 TOWNSHIP 22-5 RANGE_	36-E NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.	12. County
Eheck Ap	propriate Box To Indicate Nature of Noti	
NOTICE OF INT		SUBSEQUENT REPORT OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	COMMENCE DRILL	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND	CEMENT JOB
	OTHER	Well Status X
OTHER		2_3
<ol> <li>Describe Proposer or Completed Opera work) S ERULE 103.</li> </ol>	tions (Clearly state all pertinent details, and give pert	inent dates, including estimated date of starting any proposed
•	: +1 1072 d	
Shut In. I Fla	in July 1973 due to	o uneconomical pro-
duction This	inell is located or	na lease with an
active pilot u	saterflood project.	Well to be retained
C - C 1	1 1 3	in the perfect winds
for future se	condary use,	
	J	
/		
1. 4	nés /2/1/25	
F. 4 1)	1003 1 6/1/12	
	, .	
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•		
I hereby certify that the information about	ave is true and complete to the best of multipout.	nd beliaf
0 0	ove is true and complete to the best of my knowledge a	
PO I m	· 0+ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11 1 7:1
GNED X YOUR / / N	ight TITLE Area Su	DT DATE (1-6-14
<u> </u>	<del></del>	
	,	

ONDITIONS OF APPROVAL, IF ANY:

## RECEIVED

1.9 1 1.774

CIL COMARCIATION SOMM.