| NO. OF COPIES RECEIVED                            |  | Form C-103                    |                                   |
|---|--|-------------------------------|-----------------------------------|
| DISTRIBUTION                                      |  |                               | Supersedes Old<br>C-102 and C-103 |
| SANTA FE  | NEW MEXICO OIL CONS                                  | ERVATION COMMISSION           | Effective 1-1-65                  |
| FILE  |  |                               | 5a. Indicate Type, of Lease       |
| U.S.G.S.  |  |                               | State X Fee                       |
| OPERATOR  |  |                               | 5. State Oil & Gas Lease No.      |
| 0.2   |  |                               | NM 2A                             |
| SUI<br>(DO NOT USE THIS FORM FO<br>USE "APPL      | 7. Unit Agreement Name                               |                               |                                   |
| OIL GAS WELL                                      | OTHER.   |                               | 7. One Agreement Name             |
| 2. Name of Operator                               | 8, Farm or Lease Name                                |                               |                                   |
| TEXAS PACIFIC OIL                                 | State "A" A/c-2                                      |                               |                                   |
| 3. Address of Operator                            | 9. Well No.  |                               |                                   |
| P. O. Box 1069 - Hobbs, New Mexico 88240          |  |                               | 10. Field and Pool, or Wildcat    |
|   |  |                               |                                   |
| UNIT LETTER                                       | 990 FEET FROM THE North                              | LINE AND FEET FR              | on South Eupice                   |
| THE West LINE, S                                  |  |                               |                                   |
| 15. Elevation (Show whether DF, RT, GR, etc.)     |  |                               | 12. County                        |
|   | 3573' DF   |                               | Lea                               |
| Che   | ck Appropriate Box To Indicate N                     | lature of Notice, Report or C | Other Data                        |
|   | F INTENTION TO:                                      |                               | NT REPORT OF:                     |
|   |  |                               |                                   |
| PERFORM REMEDIAL WORK                             | PLUG AND ABANDON                                     | REMEDIAL WORK                 | ALTERING CASING                   |
| TEMPORARILY ABANDON                               |  | COMMENCE DRILLING OPNS.       | PLUG AND ABANDONMENT              |
| PULL OR ALTER CASING                              | CHANGE PLANS   | OTHER Load Oil Re             |                                   |
| OTHER   |  |                               | COVERG                            |
|   | ed Operations (Clearly state all pertinent det       |                               |                                   |
| Load Oil was recov                                | ered on subject well Decemb                          | per 21, 1968.                 |                                   |
| 18. I hereby certify that the inform Original Sig | nation above is true and complete to the best ned by | of my knowledge and belief.   | DATE                              |
|   | 1 1/   |                               |                                   |
| APPROVED BY                                       | Maria TITLE  |                               | JAN 2 2 1969                      |