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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 030132
7. Unit Agreement Name
8. Farm or Lease Name Closson A
9. Well No. #8
10. Field and Pool, or Wildcat South Eunice
12. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS <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>	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Cities Service Oil Company
3. Address of Operator % Hobbs Pipe & Supply Co., Box 2010 Hobbs, N.M. 88240	4. Location of Well UNIT LETTER B 660 FEET FROM THE north LINE AND 1980 FEET FROM THE east LINE, SECTION 18 TOWNSHIP 22-S RANGE 36-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3581	16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☒
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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 1703.

1. Propose to spot a 25 sack cement plug at 3800'.
2. Propose to spot a 25 sack cement plug at 1500', stub of 5½" and shoe of 8 5/8".
3. Propose to spot a 10 sack cement plug at surface with marker.
4. Hole will be loaded with mud laden fluids.

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

SIGNED *Arthur Schneider* TITLE Agent DATE 11-21-69
APPROVED BY *James E. Stoney* TITLE _____ DATE 11-21-69
CONDITIONS OF APPROVAL, IF ANY: _____