

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
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.
7. Unit Agreement Name <i>South Eunice</i>
8. Farm or Lease Name <i>South Eunice Unit</i>
9. Well No. <i>14</i>
10. Field and Pool, or Wildcat <i>Eunice 7 Rivers Queen</i>
12. County <i>Yuma</i>

## 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <i>Water Injection</i>
2. Name of Operator <i>Continental oil Co.</i>
3. Address of Operator <i>Box 460 Hobbs, New Mexico</i>
4. Location of Well UNIT LETTER <i>E</i> <i>1980</i> FEET FROM THE <i>North</i> LINE AND <i>660</i> FEET FROM THE <i>West</i> LINE, SECTION <i>21</i> TOWNSHIP <i>22S</i> RANGE <i>36E</i> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <i>3545' gr</i>

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 <i>converting to inj</i> <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.

*Pulled producing equipment from well. For packer on cement-lined tubing and set at 3648' w/10pts tension.*

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

SIGNED *Robert Gault III* TITLE *Admin. Supervisor* DATE *11-7-72*

APPROVED BY *Joe D. Ramey* TITLE *Dist. I. Supv.* DATE *NOV 10 1972*

*NMOCC (4) S. Eunice Unit (22) File*