

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 ☐ Fee ☒
5. State Oil & Gas Lease No.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Last Agreement No.
2. Name of Operator <i>Continental Oil Company</i>	8. Name of Well
3. Address of Operator <i>Box 460 Hobbs N. Mexico</i>	9. Well No. <i>7</i>
4. Location of Well UNIT LETTER <i>H</i> <i>1980</i> FEET FROM THE <i>North</i> LINE AND <i>980</i> FEET FROM THE <i>East</i> LINE, SECTION <i>22</i> TOWNSHIP <i>22S</i> RANGE <i>3E</i> NMPM.	10. Field and Pool or Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) <i>3538 DF</i>	11. Date

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <i>Consent to Injection</i> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input 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 103.

Pull Producing equipment from well, clean out pipe to TD, Let w/2 JSPE @ 3812, 25, 3831' interval w/ 750 gals 15% HTNE acid. Set Pl. @ \pm 3770' in 2 3/8" cont. lined TB9. and commence water injection.

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

SIGNED *Kurt Gault* TITLE *Admin Supervisor* DATE *3-8-73*

APPROVED BY *John H. Brown* TITLE *Geologist* DATE *MAR 12 1973*

CONDITIONS OF APPROVAL, IF ANY:

None