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# 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 checked="" type="checkbox"/>	Fee <input type="checkbox"/>
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. Unit Agreement Name
2. Name of Operator Solar Oil Company		8. Farm or Lease Name Royalty Holding
3. Address of Operator Box 5114 Midland, Texas		9. Well No. 1
4. Location of Well: UNIT LETTER B 1980 FEET FROM THE East LINE AND 660 FEET FROM THE North LINE, SECTION 25 TOWNSHIP 21-S RANGE 37-E N.M.P.M.		10. Field and Pool, or Wildcat UNDESIGNATED
15. Elevation (Show whether DF, RT, GR, etc.)		12. County Lea

## 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 ☐

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.

11-17-68 - Spudded 12-1/4" hole

11-18-68 - Drilled to depth of 910'. Set 9-5/8", 36#, J-55 csg at 910'. Cmt w/330 sx Class C circ. WOC 18 hr. Tested to 1000# for 30 min. held OK.

12-11-68 - Reached TD 7500'. Set 7", 26# & 23#, J-55 casing at 7500' cmt w/785 sx Class C. WOC 18 hr. tested to 1000# for 30 min held OK

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

SIGNED John W. Runyan TITLE Production Clerk DATE January 10, 1969

APPROVED BY John W. Runyan TITLE " DATE JAN 10 1969

CONDITIONS OF APPROVAL, IF ANY: