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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 checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. B 2406	
7. Unit Agreement Name	
8. Farm or Lease Name Wood State A	
9. Well No. 3	
10. Field and Pool, or Wildcat Monument Tubb	
12. County Lea	

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"/>
2. Name of Operator Bruce A. Wilbanks
3. Address of Operator Box 763 Midland, Texas 79701
4. Location of Well UNIT LETTER F 1650 FEET FROM THE West LINE AND 2310 FEET FROM THE North LINE, SECTION 16 TOWNSHIP 20-S RANGE 37-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

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 1103.

10-9-74 Ran 24 jts, 24# 8-5/8" Casing, 1185.64', Set @ 1198', K.B. Cemented w/250 sacks class H cement w/4% gel and 2% calcium chloride and 200 sacks class H w/2% gel and 2% Calcium Chloride and 1/4# floceal. Cement circulated.

10-10-74 Tested B.O.P. and casing to 800 psi for 30 minutes, held okay.

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

SIGNED L. M. Cerbasi TITLE Office Manager DATE April 7, 1975

APPROVED BY Dist. 1, SUPV. TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: