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IL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- WIW		7. Unit Agreement Name	
2. Name of Operator Sun Exploration & Production Company		8. Farm or Lease Name State "A" A/C 2	
3. Address of Operator P.O. Box 1861, Midland, Texas 79702		9. Well No. 65	
4. Location of Well UNIT LETTER <u>E</u> <u>1345</u> FEET FROM THE <u>north</u> LINE AND <u>25</u> FEET FROM THE <u>west</u> LINE, SECTION <u>9</u> TOWNSHIP <u>22-S</u> RANGE <u>36-E</u> NMPM.		10. Field and Pool, or Wildcat Eunice Seven Rivers Queen South	
15. Elevation (Show whether DF, RT, GR, etc.) 3559' GR		12. County Lea	

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 ☐
OTHER ☐

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.

3-27-86
Cleaned out fill w/bull dog bailer from 3826-3878, had pkr rubber in bailer.
Baker-Loc-Set Model A-3 w/Model "FL" on-off tool - 1.50 standard seating nipple pro-file in on-off tool.
Return well to injection

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

SIGNED

TITLE

Associate Accountant

DATE

6-26-86

ORIGINAL SIGNED BY JERRY SEXTON

JUL 2 1986

APPROVED BY DISTRICT SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: