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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 type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No. 23-025-29486

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 TXO Production Corp.	8. Farm or Lease Name Kornegay
3. Address of Operator 900 Wilco Bldg. Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 13 TOWNSHIP 20-S RANGE 38-E N.M.P.M.	10. Field and Pool, or Wildcat House (San Andres)
15. Elevation (Show whether DF, RT, GR, etc.) 3554 GL & 3565 KB	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 ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER Begin Drilling Activities. ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
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.

12-25-85 SPUD 12 1/4" hole.

12-26-85 Cmtg 8-5/8" csg. Set @ 1603'. Cmt w/450sx "lite" & 250sx "C"? Circulate to surface.

12-27-86 Cut off csg. & install WH & nipple up. Test BOP to 1000#. O.K. Drilling 7-7/8" hole.

12-28-85
thru Drilling 7-7/8" hole.
1-5-86

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

SIGNED Celicia Henderson

TITLE Engineering Assistant

DATE 1-5-86

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____

TITLE _____

DATE FEB 14 1986

CONDITIONS OF APPROVAL, IF ANY: