NO. OF COPIES RECEIVED	THE BES OFFICE C. C. S.	Form C-103 Supersedes Old
DISTRIBUTION		C-102 and C-103
SANTAFE	NEW MEXICO OIL CONSTRUCTION COMMISSION	Effective 1-1-65
FILE		5a. Indicate Type of Lease
U.S.G.S.		State K Fee
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		B-10792
SU (DO NOT USE THIS FORM FUSE "AP	INDRY NOTICES AND REPORTS ON WELLS or proposals to drill or to deepen or plug back to a different reservoir. plication for permit	7. Unit Agreement Name
1. OIL GAS WELL WELL	OTHER- Shut in gas well	8. Farm or Lease Name
2. Name of Operator		State
	Wilson Gil Company	9. Well No.
3. Address of Operator	P. O. Box 457, Artesia, New Mexico	31
	r. U. DOX 4979 12 COULT, NOT THEME	10. Field and Pool, or Wildcat
4. Location of Well	2970 FEET FROM THE North LINE AND 1980 FEET FROM	Vilson
UNIT LETTER	- 2970 FEET FROM THE LINE AND FEET FROM	
THE BAST LINE	SECTION 24 TOWNSHIP 21 RANGE 34 NMPM.	
mmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3650 IF	Lea AllIIIII
	neck Appropriate Box To Indicate Nature of Notice, Report or Oth	ner Data REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK COMMENCE DRILLING OPNS. CHANGE PLANS CASING TEST AND CEMENT JOB OTHER REPORT ON Shut	ALTERING CASING
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.

Tentative plans to use shall volume of gas from this well

for pumping engines.

13. I hereby certify th	hat the information above is true and compl	ete to the best of my knowledge and belief.	
SIGNED		TITLE Vice President	DATE March 1, 1966
APPROVED BY		TITLE	DATE
CONDITIONS OF AF	PROVAL, IF ANY:		