

HOBBS OFFICE O. C. C.

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1399
7. Unit Agreement Name
8. Farm or Lease Name Shell State
9. Well No. 8
10. Field and Pool, or Wildcat Wilson
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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Santa Rosa Water well
2. Name of Operator Wilson Oil Company
3. Address of Operator P. O. Box 457, Artesia, New Mexico
4. Location of Well UNIT LETTER C , 660 FEET FROM THE North LINE AND 1907 FEET FROM THE West LINE, SECTION 7 TOWNSHIP 21 RANGE 35 NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3689 DF

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Report on shut in well

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.

Well now being used as a Santa Rosa water well.

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

SIGNED *N. R. Kuntz* TITLE **Vice President** DATE **March 1, 1966**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: