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NEW MEXICO OIL CONSERVATION COMMISSION

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

<p align="center">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.)</p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/></p>		<p>5. State Oil & Gas Lease No. E-392</p>
<p>2. Name of Operator Millard Deck</p>		<p>7. Unit Agreement Name</p>
<p>3. Address of Operator P.O. Box 1047, Eunice, New Mexico 88231</p>		<p>8. Farm or Lease Name State WE "B" Btry 3</p>
<p>4. Location of Well UNIT LETTER P 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 24 TOWNSHIP 21S RANGE 35E NMPM.</p>		<p>9. Well No. 5</p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) 3643 ' DF</p>		<p>10. Field and Pool, or Wildcat Eumont Yates 7 Rivers Queen</p>
<p>12. County Lea</p>		

<p>16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data</p>	
<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOBS <input type="checkbox"/></p> <p>OTHER <u>Return well to producing status.</u> <input checked="" type="checkbox"/></p>

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.

1. Rigged up well servicing unit.
2. Ran tubing, rods and pump.
3. Placed well on production.

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

SIGNED <u>Millard Deck</u>	TITLE <u>Owner-Operator</u>	DATE <u>Jan. 3, 1973</u>
<p>Orig. Signed by Joe D. Ramey Dist. I, Supv.</p>		
APPROVED BY _____	TITLE _____	DATE <u>JAN 15 1973</u>
CONDITIONS OF APPROVAL, IF ANY:		