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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 - 1" (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 <input type="checkbox"/> GAS <input checked="" type="checkbox"/> OTHER <input type="checkbox"/></p>		<p>5. State Oil & Gas Lease No.</p>
<p>2. Name of Operator Continental Oil Company</p>		<p>7. Unit Agreement Name</p>
<p>3. Address of Operator P. O. Box 460, Hobbs, NM 88240</p>		<p>8. Farm or Lease Name State D</p>
<p>4. Location of Well UNIT LETTER <u>N</u> <u>660'</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>11</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> N.M.P.M.</p>		<p>9. Well No. 3</p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) 3602' <u>df</u></p>		<p>10. Field and Pool, or Wildcat Eunice Monument Grayburg 5m Gals</p>
<p>12. County Lea</p>		

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" 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 JOB <input type="checkbox"/>	

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.

Set CIBP @ $\pm 3790'$ and perf selected intervals in upper Grayburg. Treat perfs w/ 1800 gals 15% HCL-NE acid, 29,000 gals treated produced water and 40,000 # 20/40 sand.

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

SIGNED Robert Gault III TITLE Admin. Supervisor DATE 4-4-73

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC-4 FILE