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# NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 22 11 42 AM '66

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

## 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
3. Address of Operator		9. Well No.
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER <u>  </u> , <u>  </u> FEET FROM THE <u>  </u> LINE AND <u>  </u> FEET FROM		
THE <u>  </u> LINE, SECTION <u>  </u> TOWNSHIP <u>  </u> RANGE <u>  </u> NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
<u>  </u>		<u>  </u>

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

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <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.

Well temporarily abandoned on Form C-103 approved 9-13-63.  
No plans are anticipated for remedial work in the near future.

THE COMMISSION MUST BE NOTIFIED  
EVERY 6 MONTHS ON FORM C-103  
AS TO THE WELL STATUS AND YOUR  
FUTURE PLANS FOR THIS WELL

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

Original Signed

A. D. Kloxin

SIGNED    TITLE    DATE   

APPROVED BY    TITLE    DATE   

CONDITIONS OF APPROVAL, IF ANY:

*Journal of Management Inquiry* 17(6)

*Journal of Management Education* 36(7)br/>© The Author(s)  
10.1177/0095647212468111  
<http://jme.sagepub.com>