

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☒ Fee ☐

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator C.E. LONG	8. Farm or Lease Name PECH-STATE
3. Address of Operator Box 1943, Midland, Tx 79702	9. Well No. 1
4. Location of Well UNIT LETTER L 1650 FEET FROM THE SOUTH LINE AND 990 FEET FROM THE WEST LINE, SECTION 32 TOWNSHIP 21-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat JALMAT
15. Elevation (Show whether DF, RT, GR, etc.) 3623' GR	12. County LEA

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 DEEPEN <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

DEEPEN TO ESTIMATED 3900' AND RUN 4 1/2" CASING.

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

SIGNED Paul Kautz TITLE Owner-operator DATE 1/15/87

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

JAN 16 1987

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 15 1987

OCD

HOBS OFFICE