

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" 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 checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name <i>Smart Hand Unit</i>
2. Name of Operator <i>Continental Oil Company</i>		8. Farm or Lease Name <i>Smart Hand Unit</i>
3. Address of Operator <i>Box 460 Hobbs, New Mexico 88240</i>		9. Well No. <i>36</i>
4. Location of Well UNIT LETTER <i>E</i> <i>1980</i> FEET FROM THE <i>North</i> LINE AND <i>650</i> FEET FROM THE <i>West</i> LINE, SECTION <i>5</i> TOWNSHIP <i>21-S</i> RANGE <i>37-E</i> NMPM.		10. Field and Pool, or Wildcat <i>Smart Hand 7 Pool Area</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3493 GR</i>		12. County <i>Lea</i>

16.

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.

It is proposed to slim out the smart well to TD - 3780', acidize the open hole section with approx. 2,000 gal. of 15% HSTN acid. Run sanding equipment and return to production.

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

SIGNED *[Signature]* TITLE *Asst. Supervisor* DATE *11-6-70*

APPROVED BY *[Signature]* TITLE *SUPERVISOR* DATE *NOV 10 1970*

CONDITIONS OF APPROVAL, IF ANY:

NAI 3, 7-10

RECEIVED

NOV - 9 1970

OIL CONSERVATION COMM.
HOBBS, R. L.