NO. OF COPIES RECEIVED					Form C-103		
DISTRIBUTION	24a 321 M S (C T T) (2 10				Supersedes Old C-102 and C-103		
SANTA FE	NEW MEXICO	DIL CONSI	ERVATION COMMISSION		Effective 1-1-6	65	
U.S.G.S.	j.	AY B	8 55 AM '69	F3	a. Indicate Type	of Lease	
LAND OFFICE	•	imi ()	O 22 Hij 01		State X	Fee	
OPERATOR				ļ-	State Oll & Ga	s Lease No.	
					B - 935		
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.)							
OIL X GAS WELL X	OTHER-			,	7. Unit Agreemen	t Name	
2. Name of Operator					8. Farm or Lease Name		
HUMBLE OIL & REFINING COMPANY					New Mexico "V" State		
P. O. Box 2100, Hobbs, New Mexico 88240					9. Well No.		
4. Location of Well IMII 660 UNIT LETTER					10. Field and Pool, or Wildcat Wantz Abo Pool		
THE West LINE, SECTION	10 township	21 - S	37-E	NМРМ.			
mmmmmm	15. Elevation (Sho	w whather	OF RT CR ata l		12. County	HHHHH	
	13: Elevation (one	3,470			Lea		
	Appropriate Box To Ind	dicate N	-		r Data REPORT OF:		
NOTICE OF IN	TTENTION TO.		3063	BEQUENT	REPORT OF:		
PERFORM REMEDIAL WORK X	PLUG AND ABA	NDON	REMEDIAL WORK		ALTERI	ING CASING	
TEMPORARILY ASANDON			COMMENCE DRILLING OPNS.		PLUG A	ND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PLANS	' 니	CASING TEST AND CEMENT JQ	. <u> </u>			
OTHER			OTHER				
17. Describe Proposed or Completed Op work) SEE RULE 1103.	erations (Clearly state all per	rtinent deta	ils, and give pertinent dates	, including es	timated date of s	tarting any proposed	
Pull rods and tubing on top of plug. Loa per foot from 6,200' 6,262 feet inclusive packer and 3 joints 6,275 feet. Acidize	d hole with brine to 6,204', 6,225 (30 shots) and lo of tail pipe below	Perf to 6, og perf packe	orate 5-1/2 inch 235', 6,246' to 6 orations. Rerun r. Bottom of tai	casing w 5,254', s tubing w 1 pipe s	rith 1 RASF and 6,258' with hookwa at approxim	F shot to all mately	
Reference Order No.			•				
Case No. 4	108	. 13			<u>``</u>		
ì			I			•	
	•						
		* .	to the second se				
				\			
18. I hereby certify that the information	above is true and complete to	the best of	my knowledge and belief.				
SIGNED BESSUR	mela.	17LE	istrict Services	Supvr.	5/7	7/69	
he sels	Thirt			:	DATE		
APPROVED BY		ITLE			DATE		
CONDITIONS OF APPROVAL, IF ANY		1					