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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
2. Name of Operator Continental Oil Company	8. Farm or Lease Name Nolan
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>N</u> <u>660'</u> FEET FROM THE <u>South</u> LINE AND <u>1990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>11</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Blinbry Drinkard
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lee.

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 <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <u>DHC Blinbry f' Drinkard</u> <input checked="" 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.

Administrative Order NO. DHC-197.

Pulled Tbg f' Pkr. Ran 2 1/8" Tbg Set At 5850'.
Down-hole commingled the Blinbry f' Drinkard
Pools. Flowed 9 Bbls oil, 8 Bbls Wtr, 251 MCF
IN 24 Hrs.

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

SIGNED Wm. A. Butterfield TITLE ADMIN. SUPERV. DATE 8-31-76

Orig. Signed by
Jerry Sexton

Dist. 1, Supv.

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC (5), ARIO, AMOCO, Chevron, F, Le