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SANTA FE	NEW ME	NEW MEXICO OIL CONSERVATION COMMISSION			C-102 and C-103 Effective 1-1-65		
FILE							
U.S.G.S.					5a. Indicate Typ	e of Lease	
LAND OFFICE					State	Fee 🗙	
OPERATOR					5, State Oil & G	as Lease No.	
USE APP		REPORTS ON WE	ELLS to a different resef roposals.)	voir.			
I. OIL XX GAS WELL	OTHER-				7. Unit Agreeme	nt Name	
2. Name of Operator					8. Farm or Leas	e Name	
Sohio Petroleum Company					Alves		
3. Address of Operator			······································		9. Well No.	••••••••••••••••••••••••••••••••••••••	
P. O. Box 3000	Midland, Texas 7	9701			1		
4. Location of Well					10. Field and Pool, or Wildcat		
UNIT LETTER H	1980 FEET FROM	North	660		Penrose-S	kelly-Grayburg	
East		OWNSHIP 215					
THEUINE, S	JECTIONT	OWNSHIP	RANGE VIL	NMPM.			
15. Elevation (Show whether DF, RT, CR, etc.) 3482' GR					12. County		
	Appropriate Roy	To Indiana Nat			<b>D</b>		
	eck Appropriate Box	To indicate Nat		-	ier Data ' REPORT OF	:	
PERFORM REMEDIAL WORK	PLUG	AND ABANDON	EMEDIAL WORK		ALTE	RING CASING	
TEMPORARILY ABANDON		c	OMMENCE DRILLING OPN	s.	PLUG	AND ABANDONMENT	
PULL OR ALTER CASING	CHAN	GE PLANS	ASING TEST AND CEMEN OTHER REQUE	st for Ex	tension of	<b>X</b>	
OTHER			Temporarily	Abandoned	Status	L	
17 Departies Depared of Complete	d Orientian (Classificate	<u> </u>					

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.

Sohio Petroleum Company respectfully requests a one year extension to the exception to Rule 201-B, which would allow the subject well to remain temporarily abandoned for this additional period of time. According to our records, the present exception expires December 1, 1975.

It is anticipated that this wellbore will have some further utility in our operations as a salt water disposal well. There is also a possibility that the wellbore would be used in secondary recovery operations. For these reasons, it is requested that the wellbore be granted an exception so that it would not be permanently abandoned at this time.

Experies 12/1/16

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

SIGNED Alteration		TITLE District Superintendent	DATE10-30-75		
	ing Stored <b>By</b> to a state	· ·		4 1 Ng	3
APPROVED BY	- the second	TITLE	DATE		
CONDITIONS OF APP	PROVAL, IF ANY:				