NO. OF COPIES RECEIVED		
DISTRIBUTION		Form C-103 Supersedes Old
NTAFE	NEW MEXICO OIL CONSERVATION COM	C-102 and C-103
FILE	THE WEXICO DIE CONSERVATION COM	MISSION Effective 1-1-65
U.S.G.S.	3-NMOCC	Sq. Indicate Tune of Learn
LAND OFFICE	1-File	5a. Indicate Type of Lease
OPERATOR		State Fee.XX 5. State Oil & Gas Lease No.
		5. State Off & Gds Ledse No.
SU	NDRY VOTICES AND PEROPTS ON WELLS	
(DO NOT USE THIS FORM FO USE **APPI	NDRY NOTICES AND REPORTS ON WELLS REPROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT LICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	RESERVOIR.
··		7. Unit Agreement Name
WELL XX GAS WELL	OTHER-	
2. Name of Operator		8. Farm or Lease Name
GETTY OIL COMPA	NY .	D. C. HARDY
3. Address of Operator		9. Well No.
	OBBS, NEW MEXICO 88240	2
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER	660 FEET FROM THE SOUTE LINE AND 198	90 FEET FROM
EAST	ECTION 20 TOWNSHIP RANGE	37E
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
		LFA ()
Che	ck Appropriate Box To Indicate Nature of Notice	2. Report or Other Data
NOTICE O	FINTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANCON	COMMENCE DRILLIN	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND C	
	OTHER	NIO WELL
OTHER		
17 Describe Granged or Complete	d Oth(ClI II II	
work) SEE RULE 1 103.	d Operations (Clearly state all pertinent details, and give pertine	ent dates, including estimated date of starting any proposed
The Area is hair	or avaluated for receible and use a	
The Area is bein	ng evaluated for possible waterflood.	
Request extension	on of shut-in status. This Area is bei	
on quote checinote	a of shacin status. This Area is bei	ng evaluated for possible waterflood.
Well shut-in 4-1	-7 0	
	, , , , , , , , , , , , , , , , , , , ,	
		spires 11-1-76
	\mathcal{A}	xpres 11-1-16
		//
8. I hereby certify that the informat	tion above is true and complete to the best of my knowledge and	belief.
	NAL SIGNED BU:	
IGNED _C.L. Wade:	a = = = = = = = = = = = = = = = = = = =	ODDING 30 AC TO
IGNED	U. L. MAGO FITTE AREA SUPERINTEN	NDENT DATE 10-22-75
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WLG/bh

CONDITIONS OF APPROVAL, IF ANY: