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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 <small>(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.)</small>		
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name	
2. Name of Operator <i>Humble Oil & Refg Co.</i>	8. Farm or Lease Name <i>J.D. Knox</i>	
3. Address of Operator <i>Box 1600 - Midland, Texas 79701</i>	9. Well No. <i>9</i>	
4. Location of Well UNIT LETTER <i>A</i> , <i>330</i> FEET FROM THE <i>N</i> LINE AND <i>990</i> FEET FROM THE <i>E</i> LINE, SECTION <i>10</i> TOWNSHIP <i>21-S</i> RANGE <i>36-E</i> NMPM.	10. Field and Pool, or Wildcat <i>Oil Center Blinberry</i>	
15. Elevation (Show whether DF, RT, GR, etc.) <i>3571 DF</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"/>	OTHER <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.

We propose to acidize well w/ 9000 gal. 15% NE acid, pump test well. If unsatisfactory results, pull rods, pump and tbg, perforate from 5856-5866' w/ 1 shot/ft, stimulate and return well to production.

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

SIGNED *Henry Soto* TITLE *Unit Head* DATE *2/6/70*
APPROVED BY *John A. Stanley* TITLE *SUPERVISOR DISTRICT I* DATE *2/6/70*

CONDITIONS OF APPROVAL, IF ANY: